

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90060 019 ***150.00

DOCUMENT # F98000001269

1. Entity Name

MANUFACTURERS HANOVER LEASING INTERNATIONAL CORP

Principal Place of Business 712 MAIN STREET, 2ND FL 24 CBBE 377 HOUSTON TX 77002	Mailing Address PO BOX 2558 24 CBBE 377 HOUSTON TX 77252-2558
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 712 Main Street 24th Floor Suite, Apt. #, etc. 24-CBBE-377		3. Mailing Address Suite, Apt. #, etc.	
City & State Houston, Texas		City & State	
Zip 77002	Country U.S.A.	Zip	Country

4. FEI Number 13-2784280	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input checked="" type="checkbox"/> Delete		TITLE	President	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	BILELLO, JOHN			NAME	F. Hall Webb		
STREET ADDRESS	712 MAIN STREET, 2ND FL			STREET ADDRESS	712 Main Street 24-CBBE-74		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	Houston, Texas 77002		
TITLE	VD	<input checked="" type="checkbox"/> Delete		TITLE	Senior Vice Pres., Director	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	BISHOP, ROBERT			NAME	Michael V. Addy		
STREET ADDRESS	712 MAIN STREET, 2ND FL			STREET ADDRESS	712 Main Street 02-CBBN-53		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	Houston, Texas 77002		
TITLE	AV	<input checked="" type="checkbox"/> Delete		TITLE	Asst. Vice President	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MCKINNEY, LELAND			NAME	Leland L. McKinney		
STREET ADDRESS	712 MAIN STREET, 2ND FL			STREET ADDRESS	712 Main Street 24-CBBE-377		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	Houston, Texas 77002		
TITLE	AV	<input checked="" type="checkbox"/> Delete		TITLE	Asst. Vice President	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YEH, LING L			NAME	Ling-Ling Yeh		
STREET ADDRESS	712 MAIN STREET, 2ND FL			STREET ADDRESS	712 Main Street 24-CBBE-377		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	Houston, Texas 77002		
TITLE	SD	<input checked="" type="checkbox"/> Delete		TITLE	VP, Secretary, Director	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	REITMAN, JEFFREY			NAME	Jeffrey Reitman		
STREET ADDRESS	712 MAIN STREET, 2ND FL			STREET ADDRESS	712 Main Street 26-CBBE-45		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	Houston, Texas 77002		
TITLE	VASD	<input checked="" type="checkbox"/> Delete		TITLE	VP, Director	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	TULLOCH, GARY			NAME	Gary E. Tulloch		
STREET ADDRESS	712 MAIN STREET, 2ND FL			STREET ADDRESS	712 Main Street 24-CBBE-377		
CITY-ST-ZIP	HOUSTON TX			CITY-ST-ZIP	Houston, Texas 77002		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gary E. Tulloch DATE: 1/19/2000 DAYTIME PHONE #: (713) 216-2645
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR