FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G43410

(1)

| 1. Corporation Name HI-TECH LEASING, INC. Principal Place of Business Mailing Address Mailing Address | | | | | | | | | |
|---|--|---|----------------|-------------------|--|--|----------------|---------------|--|
| 3040 E COMMERCIÁL BLYD P.O. BOX 198 POMPANO BEACH FL 33061 | | 3040 E COMMERCIAL BLYD P.O. BOX 198 POMPANO BEACH FL 33081-0198 | | | | | | | |
| | | | | | 3. Date incorporated or Qualified 06/14/1983 | 14/1983 03/14/1996 | | | |
| | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | | oplied For | |
| 1 | | 26 Pulto Apt # eto | | | 59-2302948 | | | ot Applicable | |
| Suite, Apt. ≇ | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | K. | \$8.75 A | | |
| City & State | | City & State | | | 6. Election Campaign Financing | | \$5.00 | | |
| :3 | | 28 | | | | Trust Fund Contribution | | Added t | |
| Zip | Country | Zip | Cou | intry | | 8. This corporation has liability for | | | . 199.032 |
| 24 | 25 | 29 | 30 | , | | | Yes 🗌 | | ···· |
| | 9. Name and Address of Current | Registered Agent | | 201 1 | | 10. Name and Address of New Re | igistered A | gent | |
| | TINI, RONALD A. | | ļ | 81 1 | Vame | | | | |
| | E COMMERCIAL BLVD | | ļ | B2 S | Street Addre | ess (P.O. Box Number is Not Acceptal | ole) | | |
| FT. L | AUDERDALE FL 33308 | | l | 83 | | | | | ······································ |
| | | | 1 | 63 | | | | | |
| | | | | 84 (| City | | FL | 85 Zip (| Code |
| 44 Durcuani t | a the provisions of Sections 607.0500 | and 607 1508 Florida Statu | tas the al | housen | amed corne | oration submits this statement for the I | | handing it | registered |
| office of te | egistered agent, or both, in the State i | of Florida. Such change was | authorized | d by th | e corporation | oration submits this statement for the pon's board of directors. I hereby acce | pt the appo | intment as | registered |
| agent. Lar | m familiar with, and accept the obliga | tions of, Section 607.0505, FI | orida Stat | utes. | | | | | |
| SIGNATURE | Signature squed or printed name of registered agon | (NO) altra trace it about time to | TF - Registere | A Anent I | innatura reculta | ad when reinstating) | DATE | | |
| 12. | OFFICERS AND | | 13. | rigo | Marine rede | ADDITIONS/CHANGES TO OFFIC | | DIRECTOR | 1S IN 12 |
| TITLE | STD | DELETE | 1.1 70 | TLE | | | | Change | Addition |
| NAME | AQUINO, DIANE | | 1.2 NA | AME | | | | | |
| STREET ADDRESS | 3040 E COMMERCIAL BLVD | | 1.3 ST | TREET AD | ORESS | | | | |
| CITY-S1-ZIP | FT. LAUDERDALE FL | | 140 | ITY-\$1-2 | ?IP | | | | |
| TITLE | PD | ☐ DELETE | 21 17 | TLE | | | | Change | Addition |
| NAME | MARTINI, RONALD A. | | | 22 NAME | | | | | |
| STREET ADDRESS | 3040 E COMMERCIAL BLVD | | 23 ST | 23 STREET ADDRESS | | | | | |
| CITY-ST-Z-P | FT. LAUDERDALE FL | | 240 | HY-SY- | ZIP | | | | |
| TiTLE | VD | DELETE | 3.1 T/ | TLE | | | 1 | Change | Addition |
| NAME | BECKER, NORMAN | | 3.2 N/ | AME | | | | | |
| STREET ADDRESS | 3040 E COMMERCIAL BLVD | | 3.3 ST | TREET AD | Dress | | | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL | | 3.4. C | HTY-ST- | ZIP | | | | |
| TITLE | | DELETE | 4.1 Ti | TLE | | | 1 | Change | , Addition |
| NAME | | | 4. 2 N | IAME | | | | | |
| STREET ADDRESS | | | 4.3 ST | TREET AD | DRESS | | | | |
| CITY - S1 - ZIP | | · · · · · · · · · · · · · · · · · · · | 4.4 CI | ITY - \$T - Z | ZIP : | | | | |
| TITLE | | ☐ DELÆTE | 5.1 T(| TLE | | | ļ | Change | Addition |
| NAME | | | 5.2 N/ | AME | | | | | |
| STREET ADORESS | | | 5.3 S | TREET AO | ORESS | | | | |
| CITY-ST-ZIP | ···· | | 5.4 CI | ITY-\$1-7 | ZIP | | ···· | | |
| TITLE | | DELETE | 6.1 TI | TLE | | • | | Change | Addition |
| NAME | | | 6.2 N/ | AME | | | ÷ | | |
| STREET ADDRESS | | | 6.3 \$1 | TREET AD | DRESS | | | | |
| CHY-S1-ZIP | | | | 11Y-S1-2 | | | | | |
| 14. I do herel | by certify that the information supplied | I with this filing does not qual | lify for the | exemi | ption stated | In Section 119,07(3)(i), Florida Statuti my signature shall have the same leg | es. I further | certify that | the |
| l am an of | fficer or director of the corporation or n Block 12 or Block 13 if changed, or | the receiver or trustee empor | wered to e | execute | e this report | t as required by Chapter 607, Florida | Statutes; an | d that my r | name |

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/97 954-76-0902

FILED

Feb 18 1997 8:00am

Secretary of State