

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K50545** (8)

1. Corporation Name

BETTER LEASING, INC.

Principal Place of Business

**CARLOS AGUILAR
13352 S.W. 26TH TERRACE
MIAMI FL 33175**

Mailing Address

**CARLOS AGUILAR
13352 S.W. 26TH TERRACE
MIAMI FL 33175**



2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24		29	
25		30	

3. Date Incorporated or Qualified	3a. Date of Last Report
12/12/1988	02/24/1995
4. FEI Number	Applied For
65-0087737	Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**AGUILAR, CARLOS
13352 S.W. 26TH TERR.
MIAMI FL**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.050, Florida Statutes.

SIGNATURE

Carlos Aguilar

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	PD
NAME	AGUILAR, CARLOS	1.2 NAME	AGUILAR, CARLOS
STREET ADDRESS	13352 S.W. 26TH TERR.	1.3 STREET ADDRESS	13352 S.W. 26 Terr.
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FL 33175
TITLE	VSD	2.1 TITLE	VD
NAME	AGUILAR, REGINA	2.2 NAME	AGUILAR, REGINA
STREET ADDRESS	13352 S.W. 26TH TERR.	2.3 STREET ADDRESS	13352 S.W. 26 Terr.
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33175
TITLE		3.1 TITLE	VT
NAME		3.2 NAME	DUART, CARLOS
STREET ADDRESS		3.3 STREET ADDRESS	14471 SW 161 ST
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI, FL 33177
TITLE		4.1 TITLE	S
NAME		4.2 NAME	DUART, REGINA
STREET ADDRESS		4.3 STREET ADDRESS	14471 SW 161 ST.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI, FL 3317
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

Carlos A. Duarte

CARLOS A. DUARTE

2/27/96 305-238-6730

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE DAYTIME PHONE

CR2E034 (12/95)