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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STE. 316

22471 MCMULLEN BOOTH RD..



FLORIDA DEPARTMENT OF STATE

Bandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K91389

(2)

2471 MCMULLEN BOOTH RD.

STE. 316

**FUTURE LEASING CORPORATION** 

4

Mailing Address

## FILED Apr 27 1998 8:00am Secretary of State



CLEARWATE	R FL 34619	CLEARWATER FL 34619			DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified	
			<u></u>		05/30/1989	
	lace of Business	2a. Mailing Address			4. FEI Number Applie	
21		26				plicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Addi	
22		27			ree Requir	<del>-</del>
City & Stat	10	City & State			6. Election Campaign Financing \$5.00 May	
23 Zin	Country	28]	Country		Trust Fund Contribution Added to Fo	
24 Zip 33	159	7 37 59		y	8. This corporation owes or has paid the current year Intangi Personal Property Tax due June 30. X Yes N	
24	Name and Address of	29 30101	30		Personal Property Tax due June 30.  Yes IN.  10. Name and Address of New Registered Agent	<del></del>
	<u>, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	or Carrent Inglistored Rigorit	81	Name	10. Harris and Address of New Hogistolog Agent	
	SALLA, MICHAEL J.	nn.	Į.			
2471 MCMULLEN BOOTH RD. STE. 316			82	82 Street Address (P.O. Box Number is Not Acceptable)		
. 51	E. 310 EARWATER FL 34 <del>019</del>	22759	63	<del> </del>		
, u	EARWAIER FL 34019	22.21	~	1		
			84	City	FL 85 Zip Code	e
dd Durayant	to the provinces of Castings	007 0000 and 007 4500 Ft. Ida Ct. L.	10 10 10 10 10 10 10 10 10 10 10 10 10 1			-1-4
office or r	registered agent, or both, in	the State of Florida, Such change was a	uthorized b	y the corpora	rporation submits this statement for the purpose of changing its re- alion's board of directors. I hereby accept the appointment as regi	gistered
agent. I a	im familiar with, and accept:	the obligations of, Section 607,0505, Flo	rida Statute	S.	-	
SIGNATURE	Signature, typed or printed name of re	TOO TO THE PARTY OF THE PARTY O	- K-2		uired when reinstating) DATE	
12.		DISTRICTED AGENT AND DIRECTORS  CERS AND DIRECTORS	13.	ent signatura red	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	1.12
TITLE	PD	DELETE	1,1 TITLE			Addition
NAME	LASALLA, MICHAEL J	<del></del>	1.2 NAME	1		
STREET ADDRESS	2471 MUMULLEN BO			T ADDRESS		
CITY-ST-ZIP	CLEARWATER FL	O11711D.; O12. 010	1.4 CITY - 1	-		
TITLE	OPENIUM IEU IE	DELETE	2.1 TITLE	51- <u>2</u> 1r	☐ Change ☐	Addition
NAME			2.2 NAME	1		
STREET ADDRESS			2.3 STREE	TADDOCCC		
CITY-ST-ZIP			2.4 CITY-	- 1	· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	3.1 TITLE	31-211	Change	Addition
NAME			3.2 NAME			
STREET ADDRESS	ļ			T ADDRESS		
CITY-ST-ZIP			3.3 STALE			
TITLE	<del></del>	DELETE	4.1 TITLE	31-21	Change C	Addition
NAME			4.2 NAME	1	Shariga to	
STREET ADDRESS				T ADDRESS		
	Í.		4.3 3 INC.	1 AUDALOS		
CITY. ST. 7ID	ł		AACGY S	ST. 7ID		
CITY - ST - ZIP		DELETE	4.4 C(TY - 5	ST-ZIP	Channe	Addition
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TITLE NAME		DELETE	5 1 TITLE 5.2 NAME		Change	Addition
TITLE NAME STREET ADORESS		DELETE	5 1 TITLE 5.2 NAME 5.3 STREE	T ADDRESS	Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	T ADDRESS		
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NAME STREET ADORESS CITY-ST-ZIP TITLE NAME			5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-: 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP		
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE			5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-: 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP		

indicated on this annual report or supplied with this miling does not qualify for the exemption stated in section 119.07(3)(). Florida statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and courset 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 if changed, or on an attachment with an address.

SIGNATURE:

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4/15/98

(813)724-9559