

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90357 017 ***150.00

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1. Entity Name
HFY LEASING COMPANY



Principal Place of Business
36263 US HWY 19 N
PALM HARBOR, FL 34684

Mailing Address
C/O MOUSTOPOULOS
PO BOX 2322
TARPON SPRINGS, FL 34688

40073560



2. Principal Place of Business
2706 US HWY ALT 19 N.
Ste 213

3. Mailing Address
C/O MOUSTOPOULOS
PO BOX 2322

04222006 Chg-P CR2E034 (11/05)

City & State
PALM HARBOR, FL

City & State
Palm Harbor, FL

4. FEI Number
81-0567124

Applied For
Not Applicable

Zip 34683 Country USA

Zip 34682 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOUSTOPOULOS, DEMETRIOS
36263 US HWY 19 N
PALM HARBOR, FL 34684

Name

Street Address (P.O. Box Number is Not Acceptable)

2706 US HWY ALT 19 N. Ste 213

City

PALM HARBOR

FL

Zip Code

34683

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME MOUSTOPOULOS, DEMETRIOS
STREET ADDRESS 36263 US HWY 19 N
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2706 US HWY ALT 19 N. STE 213
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Demetrios Moustopoulos DEMETRIOS MOUSTOPOULOS

4/26/06

Date

Daytime Phone #