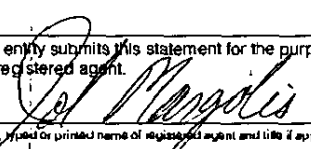
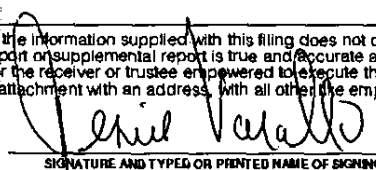


FILED
Sep 15, 2003 8:00 am
Secretary of State

09-15-2003 90161 024 ***750.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000121901					
1. Entity Name BMV LEASING, INC.					
Principal Place of Business 11934 SW 78 TERRACE MIAMI, FL 33183			Mailing Address 11934 SW 78 TERRACE MIAMI, FL 33183		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 16-1667684	
				Applied For ☐ Not Applicable	
				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	
				Name John A. Margolis	
				Street Address (P.O. Box Number is Not Acceptable) Suite 330, 9990 S.W. 77th Ave.	
				City Miami, FL	
				Zip Code 33156	
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 				DATE August 15, 2003	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when amending)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.26 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE	D GONZALEZ, MIRIAM ☒ Delete				
NAME	11943 SW 78 TERRACE				
STREET ADDRESS	MIAMI, FL 33183				
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
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TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	D Jesus Vasallo ☐ Change ☐ Addition				
NAME	4049 Broadway, Apt. 257				
STREET ADDRESS	New York, NY 10032				
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 8/15/03 (305) 595 1911					

CP2E034 (10/02)