

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

**APPROVED
AND
FILED**

1997 JUN -3 PM 3: 42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P37397 (7)
1. Corporation Name
AMERIFIRST LEASING CORP.



Principal Place of Business Mailing Address
~~888 DAHLIA LANE~~ ~~888 DAHLIA LANE~~
VERO BEACH FL 32963 VERO BEACH FL 32963-4914

3. Date Incorporated or Qualified 3a. Date of Last Report
02/03/1992 **05/01/1996**

2. Principal Place of Business 2a. Mailing Address
21 **2925 CARDINAL DRIVE** 26 **2925 CARDINAL DRIVE**
Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number Applied For
65-0309512 Not Applicable

22 27 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

23 28 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

24 25 29 30 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GIEL, DOROTHY L.
~~888 DAHLIA LANE~~
VERO BEACH FL 32963

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
2925 CARDINAL DRIVE
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, or 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Dorothy Giel* DATE **4/3/97**
Signature typed or printed name of registered agent and the filer if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **PS GIEL, DOROTHY L.**
STREET ADDRESS ~~422 CONN WAY~~
CITY-ST-ZIP **VERO BEACH FL**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS **2925 CARDINAL DRIVE**
1.4 CITY-ST-ZIP

TITLE DELETE
NAME **D WILLIS, BILL P.**
STREET ADDRESS **2025 GORDINOR DR**
CITY-ST-ZIP **VERO BEACH FL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS **2925 CARDINAL DRIVE**
2.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS **600002203356-1**
3.4 CITY-ST-ZIP **-06/05/97-01110-001**

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS *****1540.00**
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 if changed, or on an attachment with an address.

CR2E034 (9/96)

4/3/97