

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000046658 (7)**

1. Corporation Name

R & S EQUIPMENT LEASING AND SALES, INC. OF FLORIDA



Principal Place of Business

Mailing Address

% STEVEN P. KUSHNER
1515 BROADWAY
FORT MYERS FL 33901

% STEVEN P. KUSHNER
1515 BROADWAY
FORT MYERS FL 33901

3. Date Incorporated or Qualified

3a. Date of Last Report

06/15/1995

2. Principal Place of Business

2a. Mailing Address

21 24278 Production Circle

26 24278 Production Circle

4. FEI Number

Applied For

65-0593272

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

Bonita Springs FL

Bonita Springs FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

34135

USA

34135

USA

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

KUSHNER, STEVEN P
GOLDBERG, GOLDSTEIN & BUCKLEY
1515 BROADWAY
FORT MYERS FL

81 Name

Kushner, Steven P.

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

1375 Jackson Street, Suite 202

83

84 City

Fort Myers

FL

85 Zip Code

33901

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

Steven P. Kushner

Steven P. Kushner

6-17-96

Signature type: (or printed name of registered agent and the filer please)

(NOTE: Registered Agent signature required when relevant)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	WASHUTA, RICHARD	
STREET ADDRESS	24278 PRODUCTION CIRCLE	
CITY - ST - ZIP	BONIT SPRINGS FL 33923	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WASHUTA, STEVEN	
STREET ADDRESS	24278 PRODUCTION CIRCLE	
CITY - ST - ZIP	BONIT SPRINGS FL 33923	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	34135
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	34135
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	D ST WASHUTA
3.3 STREET ADDRESS	24278 Production Circle
3.4 CITY - ST - ZIP	Bonita Springs, FL 34135
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	LORIE WASHUTA
4.3 STREET ADDRESS	24278 Production Circle
4.4 CITY - ST - ZIP	Bonita Springs, FL 34135
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Steven P. Kushner

6/21/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

PRINTED NAME

CR2E034 (3/96)