## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DÖCUHENT# P95000046658 Feb 19, 2000 8:00 am 1. Entity Name R & S EQUIPMENT LEASING AND SALES, INC. OF FLORI **Secretary of State** 02-19-2000 90004 039 \*\*\*150.00 Principal Place of Business Mailing Address 24278 PRODUCTION CIRCLE 24278 PRODUCTION CIRCLE BONITA SPRINGS FL 34135-7057 BONITA SPRINGS FL 34135 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0593272 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KUSHNER, STEVEN P Street Address (P.O. Box Number is Not Acceptable) 1375 JACKSON STREET, SUITE 202 FT. MYER\$ FL 33901 City Zip Code 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2F034 /9/99 **VPD** TITLE Change ☐ Addition Delete TITLE WASHUTA, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 24278 PRODUCTION CIRCLE CITY-ST-ZIP CITY-ST-7IP **BONIT SPRINGS FL 34135** ☐ Change ☐ Addition ☐ Delete TITLE WASHUTA, STEVE NAME STREET ADDRESS 24278 PRODUCTION CIRCLE STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP **BONIT SPRINGS FL 34135** ☐ Addition Change TITLE Delete WASHUTA, SONIA NAME 24278 PRODUCTION CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34135** CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE WASHUTA, LORIE NAME 24278 PRODUCTION CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BONITA SPRINGS FL 34135** CITY-ST-ZIP TITLE □ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/00

(7/6) 758-8226

Daytime Phone #