

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State
 04-19-2001 90006 002 ***158.75

DOCUMENT # P97000065902

1. Entity Name

ORADELL LEASING CORPORATION

Principal Place of Business

**6850 VIENTO WAY
 BOCA RATON FL**

Mailing Address

**6850 VIENTO WAY
 BOCA RATON FL**

2. Principal Place of Business

440 ADDISON PARK LANE

3. Mailing Address

Suite, Apt. #, etc. *same*

Suite, Apt. #, etc.

City & State

BOCA RATON, FLA

4. FEI Number **65-0780689**

Applied For
 Not Applicable

Zip

Country

33432

USA

Zip

Country

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

6. Name and Address of Current Registered Agent

**KURTZ, JENNIFER G
 6850 VIENTO WAY
 BOCA RATON FL**

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **FINKELSTEIN, JEROME**
 STREET ADDRESS **6850 VIENTO WAY 440 ADDISON PARK LANE**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **D** ☐ Delete
 NAME **FINKELSTEIN, ETHEL M**
 STREET ADDRESS **6850 VIENTO WAY**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **D** ☐ Delete
 NAME **KURTZ, JENNIFER G**
 STREET ADDRESS **6850 VIENTO WAY**
 CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Jerome A. Finkelstein - Pres.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9 April 01 561 417-1923

CR2E034 (10/00)