

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G33460

**Entity Name:** SALLAR LEASING, INC.

**Current Principal Place of Business:**

1437 FLAGLER AVE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

1437 FLAGLER AVE  
JACKSONVILLE, FL 32207 US

**FEI Number:** 59-2316837

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SALL, DAVID L., MD  
1437 FLAGLER AVE  
JACKSONVILLE, FL 32207 US

*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:** DAVID L. SALL, M.D.

01/23/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name SALL, DAVID L., M.D.  
Address 116 LORA STREET  
City-State-Zip: NEPTUNE BEACH FL 32266

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA SALL

SECRETARY

01/23/2016

Electronic Signature of Signing Officer/Director Detail

Date