


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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 259444 (8) 1. Corporation Name BERT SMITH LEASING, INC					
Principal Place of Business 3800 34TH STREET NORTH P.O. BOX 10640 ST PETERSBURG FL 33733			Mailing Address 3800 34TH STREET NORTH P.O. BOX 10640 ST PETERSBURG FL 33733		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 05/23/1962 4. FEI Number 59-0952683 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent REINTHALER, MARTIN P. 3800 34TH STREET NORTH ST PETERSBURG FL 33714			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL		
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____					
12. OFFICERS AND DIRECTORS					
TITLE	PD	<input type="checkbox"/> DELETE			
NAME	SMITH JR, E.W.				
STREET ADDRESS	1828 BRIGHTWATERS BLVD				
CITY-ST-ZIP	ST PETERSBURG FL				
TITLE	VD	<input type="checkbox"/> DELETE			
NAME	SMITH, III, E.W.				
STREET ADDRESS	1828 BRIGHTWATERS BLVD.				
CITY-ST-ZIP	ST PETERSBURG FL				
TITLE	D	<input type="checkbox"/> DELETE			
NAME	SMITH, BARBARA G.				
STREET ADDRESS	1828 BRIGHTWATERS BLVD.				
CITY-ST-ZIP	ST PETERSBURG FL				
TITLE	D	<input type="checkbox"/> DELETE			
NAME	SMITH, C.W.				
STREET ADDRESS	11601 4TH ST. N. #1508				
CITY-ST-ZIP	ST PETERSBURG FL				
TITLE	D	<input type="checkbox"/> DELETE			
NAME	CHATHAM, KIMBERLY SMITH				
STREET ADDRESS	1828 BRIGHTWATERS BLVD.				
CITY-ST-ZIP	ST PETERSBURG FL				
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
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 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.

SIGNATURE:

E.W. Smith Jr V. Pres. 2/2/98 813 527-1111

CP2E034 (1097)