

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
300 South Miami  
Tallahassee, Florida  
32399-0001

FILED  
SECRETARY OF STATE  
CORPORATIONS

95 MAY -1 AM 11:45

DOCUMENT # 301612 (8)

AAA AUTO LEASING INC

DO NOT WRITE IN THIS SPACE

Principal Office Address 1995 N.E. 142ND STREET NORTH MIAMI FL 33181-1505	Minor Address 1995 N.E. 142ND STREET NORTH MIAMI FL 33181-1505
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2. Fiscal Year (12 Months) 21	26. Major Industry 26	3. Date of Incorporation (or Conversion) 02/07/1966	3a. Date of Last Report 04/28/1994
22. State Agent # (1-6) 22	27. Fiscal Agent # (1-6) 27	4. FEI Number 59-1158211	Applied Fee Not Applicable
23. City & State 23	28. City & State 28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24. Zip 24	25. County 25	29. Zip 29	30. County 30

9. Name and Address of Current Registered Agent <b>ZILBER, SIGMUND 1995 N.E. 142ND ST NORTH MIAMI FL 33161</b>	10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City B5 Zip Code <b>FL</b>
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11. Pursuant to the provisions of Sections 607.0807 and 607.0808, 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 607.0805, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (PARTIAL)	
NAME P STEINBERG, EDWARD	STREET ADDRESS 1995 N.E. 142ND ST NORTH MIAMI FL	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DS ZILBER, SIGMUND	STREET ADDRESS 1995 N.E. 142ND ST NORTH MIAMI FL	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, hereby, certify that the information supplied with this filing is true and correct, and I understand that the corporation is liable for the consequences stated in Sections 607.0805 and 607.0808, Florida Statutes. I further certify that the information included on this annual report or supplementary 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 at the time of filing this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 2, of this report, or on the attached form with an address.

SIGNATURE: *Sigmund Zilber* Sigmund Zilber 3/10/95 (305) 944-4422