Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90295 004 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 331742

1. Corporation Name]				
EX-IM SALES AND LEASING INC						1				
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Principal Place of Business Mailing Address										
6335 WISTERIA LANE 6335 WISTERIA LANE										
APOLLO BEACH FL 33572 APOLLO BEACH FL 33572						ĺ				
11 510 551077 E 3331						DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualifed			
						1_	06/26/1968			
2. Principal P	lace of Business	2a. Mailing Address				4.	FEI Number		Appli	ed For
21		26				<u> </u>	59-1285775		Not A	pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				_	Certificate of Status Desired	\$8.7		,
27						3.	Certificate of claims posited	Fee	Requ	ired
City & Stat	6	City & State				6.	Election Campaign Financing		00 M	
23	<u> </u>						Trust Fund Contribution	Adde	ed to f	-ees
Zip	Country	Zip	Count	try		8.	This corporation owes the current year Int			
24	25		30			<u> </u>	Personal Property Tax.	Yes		No
	9. Name and Address of Curren	t Registered Agent		. т		10.	Name and Address of New Registered	Agent		
DAV	C ICE T		8	31	Name					Ì
DAVIS, LEE T.				32	Street Addre	ess (P	P.O. Box Number is Not Acceptable)			
6335 WISTERIA LANE										
APOLLO BEACH FL 33572				33						
				34	City			85 Z	ip Cod	10
					FL 65 21 COUP					J .
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the abo	ove-	-named corpo	ratio	n submits this statement for the purpose of	changing	its re	gistered
office of re	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was au ions of Section 607 0505. Flori	ithorized b ida Statute	oy t es.	he corporation	n's bo	pard of directors. I hereby accept the appoin	ntment as	regis	tered
- -			00 010.010							
SIGNATURE	Registered Ag	gent	signature required	when r	reinstating) DATE					
12.	OFFICERS AN	D DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	P DELETE			1.1 TITLE				Chan	ge	Addition
NAME	DAVIS, LEE T.			1.2 NAME						,
STREET ADDRESS	ESS 6335 WISTERIA LANE 1.35			1.3 STREET ADDRESS						1
CITY-ST-ZIP	Y-ST-ZIP APOLLO BEACH FL				-ZIP					
TITLE				2.1 TITLE				Chang	ge	Addition
NAME	CLARK, H			2.2 NAME						
STREET ADORESS				.3 STREET ADDRESS						ļ
CITY-ST-ZIP	TAIDLIDDE N. ACCO			2.4 CITY-ST-ZIP						•
TITLE				3.1 TITLE				Chang	ge	Addition
NAME				32 NAME						
STREET ADDRESS	100 0 14 17 07 14 17			3.3 STREET ADDRESS						
	Takena St. aanaa			3.4. CITY-ST-ZIP						
CITY-ST-ZIP				I. CITY-ST-ZIP				Chang	qe	Addition
	. •		4.1 HILL					,	•-	
			1	ME EET ADDRESS						
STREET ADDRESS					1					
CITY-ST-ZIP		DELETE	4,4 CITY- 5,1 TITLE		·ZIP		· · · · · · · · · · · · · · · · · · ·	Chang	ne	Addition
TITLE .	•	ר"ן מברבוב	5.1 IIILE 5.2 NAME				,	T1 Augus	90	
To the state of th					ADDRESS .					ļ
STREET ADDRESS			■ 275 O (LCE	CIF	venourego (

CITY-\$T-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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

Tee VICKIOUS RILEGITUIDAUS SIGNATURE:

813-641 1292

☐ Addition

☐ Change