

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Montanari
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 387736

(2)

1. Corporation Name

BENZ LEASING, INC.

Principal Place of Business

6520 SW 134TH DRIVE
MIAMI FL 33156

Mailing Address

6520 SW 134TH DRIVE
MIAMI FL 33156



2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

g. Name and Address of Current Registered Agent

EVANS, JAMES D.
6520 SW 134TH DRIVE
MIAMI FL 33156

3. Date Incorporated or Qualified

08/31/1971

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1361266

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Numbers Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1505, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of Registered Agent or Director

DATE

12. OFFICERS AND DIRECTORS

12. TITLE	PD	☐ DELETE
NAME	EVANS, JAMES D.	
Street Address	6520 SW 134TH DRIVE	
CITY, ST, ZIP	MIAMI FL 33156	
TITLE	VPD	☐ DELETE
NAME	EVANS, MARILYN A.	
Street Address	6520 SW 134TH DR	
CITY, ST, ZIP	MIAMI FL 33156	
TITLE	TD	☐ DELETE
NAME	EVANS, JAMES D JR	
Street Address	7250 S PRESTWICK PL	
CITY, ST, ZIP	MIAMI LAKES FL	
TITLE	SD	☐ DELETE
NAME	MOORE, HARRIETTE	
Street Address	10163 153RD CT N	
CITY, ST, ZIP	JUPITER FL	
TITLE		☐ DELETE
NAME		
Street Address		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
Street Address		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this voluntary 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 designated with an address.

SIGNATURE:

James P. Evans JAMES P. EVANS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-96

305-693-1711

CR2E034 (12/95)