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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 389414

(4)

WAREHOUSE LEASING, INC.

FILED Jan 28 1998 8:00am Secretary of State

|--|--|

Principal Place	of Business	Mailing Address			
3625 PEMBROKE ROAD 3625 PEMBROKE ROAD					
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	3 31 7.02
				10/07/1971	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
.		26		59-1364329	Not Applicable
Suite, Apt.	#, etc. #C-2	Suite, Apt. #, etc.	1 5	5. Certificate of Status Desired	\$8.75 Additional
22	*C-2	Suite, Apt. #, etc.	C-2	5. Certificate of Status Desired L	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zιρ	Country	8. This corporation owes or has paid the c	
24	25		30	Personal Property Tax due June 30.	∐ Yes ∐ No
	9. Name and Address of Curre	ent Hegisterea Agent	81 Name	10. Name and Address of New Registere	a Agent
	KES, SHARON L.		of Name		
3625 PEMBROKE RD #C-6 82 Street Address (P.O. I			ress (P.O. Box Number is Not Acceptable)	·	
HO	LLYWOOD FL 33021		83		
1			63		
			84 City		85 Zip Code
		1007 4500 51 14 51		F	
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					
	Signature, typed or printed name of registered a	gent and little if applicable. (NOTE: ND DIRECTORS	Registered Agent signature requi	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AT	ID DIDECTORS IN 12
12.	PST OFFICERS AI	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	SIKES, SHARON L.	E piece	1.2 NAME		
STREET ADDRESS	3625 PEMBROKE RD C-6		1.3 STREET ADDRESS		·
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 CITY-ST-ZIP		
TITLE		DELETE	21 TITLE		Change Addition
NAME			2.2 NAME		_ •
STREET ADDRESS			2.3 STREET ADDRESS		
SHOOT MONES	-		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME		-	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		•	3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CiTY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	autiful that the information a unalight	with this filing does not qualify for		Section 119 07/3/(i) Florida Statutae I further	cortifu that the information

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.

1/15/00 001 001-218