

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 430802

FILED  
Apr 29, 2004  
Secretary of State

**Entity Name:** EXECUTIVE CAR & TRUCK LEASING, INC.

**Current Principal Place of Business:**

2235 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 334094112

**New Principal Place of Business:**

**Current Mailing Address:**

2235 OKEECHOBEE ROAD  
WEST PALM BEACH, FL 334094112

**New Mailing Address:**

**FEI Number:** 59-1056350

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TANEN, JEFFREY S ESQ  
C/O GOLDSTEIN & TANEN  
2 S BISCAYNE BLVD STE 3250  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: SOTHEN, JULIE M  
Address: 2235 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: PTD ( ) Delete  
Name: DEAN, PATRICIA B.  
Address: 2235 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V ( ) Delete  
Name: COLLINS, HARRY  
Address: 2235 OKEECHOBEE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** PATRICIA B DEAN

PTD

04/29/2004

Electronic Signature of Signing Officer or Director

Date