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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 546405

(2)

GERALD J. NESS LEASING CO. INCORPORATED

FILED
May 01 1997 8:00am
Secretary of State



Principal Place	e of Business	Mailing Address 420 LINCOLN ROAD				{				
420 LINCOLN F										
SUITE 235		SUITE 235				•				
MIAMI BEACH I	FL 33139	MIAMI BEACH FL 33139-3009				3. Date Incorporated or Qualified .08/09/1977	ad 3a. Date of Last Report 04/23/1996			
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number			plied For	
21		26							t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	В	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip			Zip Country			8. This corporation has liability for in	ntangible ta			
24	25	29	30					No		
	g. Name and Address of Curren	it Registered Agent				10. Name and Address of New Reg	istered A	jent		
NES	S, GERALD J.			81	Name				ĺ	
	LICOLN RD. #235	ļ			Street Addr	ddress (P.O. Box Number is Not Acceptable)				
MIAI	MI BEACH FL 33139			82						
				83						
				84	City			85 Zip (Code	
				<u> </u>	<u></u>		FL,			
office or r	egistered agont, or both, in the State	of Florida, Such change was .	authorize	d by	∠the coroorat	oration submits this statement for the prior's board of directors. I hereby accep	urpose of d Lithe appoi	hanging it ntment as	s registered registered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Fl	orida Sta	tutes	s.	• •			_	
SIGNATURE	Signature, typed or printed name of registered ago	Bios	L. Carintau	ul And	and minus along to purify	ed when reinstating)	DATE			
12.	OFFICERS AN		13.	io Myc	unit signature requi	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	
TITLE	PSD	DELETE						Change	Addition	
NAME	NESS, GERALD J.			IAME						
STREET ADDRESS	420 LICOLN RD. #235			3 STREET ADDRESS		1				
CITY-ST-ZIP	MIAMI BEACH FL	14(ary - S	ST-ZIP					
TITLE			2.1 T	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS				Change	☐ Addition	
NAME										
STREET ADDRESS										
CITY-ST-ZIP				2. 4 CITY-S1-ZIP					. <u> </u>	
TITLE		DELETE	DELETE 3.1				[Change	☐ Addition	
NAME			3.2 N	IAME	Ì					
STREET ADDRESS			338	TREET	T ADDRESS					
CITY-ST-ZIP			34.	CHIY-:	\$1 - 71P					
TITLE	DELETE		4.11	4.1 TITLE			L	Change	Addition	
NAME			4. 2	NAME						
STREET ADDRESS			4.3 8	STREET	1 ADDRESS					
CITY-ST-ZIP		The tree			ST-ZIP		r	7.05	1 4440.4	
TITLE	1	☐ DELETE	511				ι	Change	Addition	
NAME				AME						
STREET ADDRESS	5			5 3 STREET ADDRESS						
CITY-ST-ZIP		T DELETE			SI - ZIP			Channe	Addition	
TITLE		☐ DELETE	611				ı	Change	☐ Addition	
NAME				AME						
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP				_	S1-7IP	110 O - E - 110 O7/OVD Flades Contra	e. I Luction	n n el ife , 41 - 4	th a	
44 Idohoro	ny partity that the information curvilis	ar with this tiling doos not ough	In the the	1 AYA	empuon siaier	d in Section 119.07(3)(i). Florida Statute	s cummer	скином плат	AT UES	

4. 1 do nereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes - 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 chapted, or on an attachment with an address.

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4/24/97 305673678