

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # 590484

1. Entity Name
J & A LEASING, INC.



Principal Place of Business
**2024 45TH STREET, NORTH
ST. PETERSBURG, FL 33713**

Mailing Address
**2024 45TH STREET, NORTH
ST. PETERSBURG, FL 33713**



01212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1858813

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**GONZALEZ, ANGELO
2024 45TH STREET, NORTH
ST. PETERSBURG, FL 33713**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VS
NAME GONZALEZ, JOSEPHINE
STREET ADDRESS 2024 45TH ST. N.
CITY-ST-ZIP ST. PETERSBURG, FL

TITLE PT
NAME GONZALEZ, ANGELO
STREET ADDRESS 2024 45TH ST. N.
CITY-ST-ZIP ST. PETERSBURG, FL

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

U00000809845
02/08/08-20039-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Angelo Gonzalez Pres.*

*Angelo Gonzalez,
President*

1-30-08

727-345-5292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #