

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 607167 (4)

1. Corporation Name

APPLIANCE LEASING SYSTEMS, INC.



Principal Place of Business

Mailing Address

C/O BUTLER, MARK. F.
4601 SHERIDAN ST. SUITE 505
HOLLYWOOD FL 33021
US

C/O BUTLER, MARK. F.
4601 SHERIDAN ST. SUITE 505
HOLLYWOOD FL 33021
US

3. Date Incorporated or Qualified
01/18/1979

3a. Date of Last Report
03/21/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1882826

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24

Country

25

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUTLER, MARK F.
1909 TYLER ST.
P.O. BOX 6
HOLLYWOOD FL 33022

81

Name
Butler, Mark F.

82

Street Address (P.O. Box Number is Not Acceptable)
4601 Sheridan Street, Suite 505

83

84

City
Hollywood

FL

85

Zip Code
33021

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]
Signature of officer or director of corporation or registered agent, if applicable

[Signature]
Signature of Registered Agent, if applicable

3/10/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
YANG, RAYMOND
1151 S. NORTH LAKE DR.
HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
MOY, JANE
1151 S. NORTH LK DR.
HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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 in an attachment with an address.

SIGNATURE:

[Signature]
RAYMOND YANG

3/10/96

925-4421

DATE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)