



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90240 048 \*\*\*150.00

<b>DOCUMENT # F01000000061</b> 1. Entity Name <b>UNIVERSAL COMMERCIAL CREDIT LEASING X, INC.</b>					
Principal Place of Business <b>14651 DALLAS PARKWAY STE. 500 DALLAS, TX 75240</b>			Mailing Address <b>14651 DALLAS PARKWAY STE. 500 DALLAS, TX 75240</b>		
2. Principal Place of Business <b>300 DELAWARE AVENUE</b> Suite, Apt. #, etc. <b>571</b> City & State <b>WILMINGTON DE</b> Zip Country <b>19801</b>		3. Mailing Address <b>300 DELAWARE AVENUE</b> Suite, Apt. #, etc. <b>571</b> City & State <b>WILMINGTON DE</b> Zip Country <b>19801</b>			
4. FEI Number <b>51-0405368</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, BENJAMAIN 300 DELAWARE AVE., SUITE 571 WILMINGTON, DE 19801 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MALJEAN, JEAN-FRANCOIS 300 DELAWARE AVE., SUITE 571 WILMINGTON, DE 19801 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEORGES LE MENER 4001 INTERNATIONAL PARKWAY CARROLLTON TX 75007 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CROZIER, BARRY A 300 DELAWARE AVE., SUITE 571 WILMINGTON, DE 19801 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PROTOKOWICZ, DANIEL 300 DELAWARE AVE., SUITE 571 WILMINGTON, DE 19801 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT CONNER, EILEEN T 300 DELAWARE AVE., SUITE 571 WILMINGTON, DE 19801 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT DARRELL K. LANE 300 DELAWARE AVE. # 577 WILMINGTON DE 19801 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNIGHT, RICHARD P 7048 GOLDEN GATE DR FORT WORTH, TX 76132 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLIVIER POIROT 4001 INTERNATIONAL PKWY CARROLLTON TX 75007 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. 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 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: <u>Darrell K. Lane</u> <b>DARRELL K. LANE</b> 4/22/04 (302) 427-7608 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					