## 2007 FOR PROFIT CORPORATION

## Apr 23, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # F01000000061 1. Fotity Name 04-23-2007 90265 008 \*\*\*150.00 UNIVERSAL COMMERCIAL CREDIT LEASING X, INC. Principal Place of Business Mailing Address 300 DELAWARE AVE. 300 DELAWARE AVE. 40011000 571 571 WILMINGTON, DE 19801 WILMINGTON, DE 19801 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 04032007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 51-0405368 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 City 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 Signature, typed or printed name of registered agent and title it applicable (EIOTE Registered Agent signature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THE X Change □ Addition ☐ Delete TIFLE NAME POINT, OLIVER POIROT, OLIVIER NAME STREET ADDRESS 4001 INTERNATIONAL PKWY STREET ADDRESS CITY-ST-ZIP CARROLLTON, TX 75007 CITY-S1-7IE TITLE Delete PID Change TIBE ☐ Addition NAME LE MENER, GEORGES MAME STREET ADDRESS 4001 INTERNATIONAL PKWY. STREET ADDRESS CITY-ST-ZIP CARROLLTON, TX 75007 CITY-ST-ZIP VS TITLE Delete TITLE ☐ Change ☐ Addition NAME CROZIER, BARRY A 300 DELAWARE AVE., SUITE 571 STREET ADDRESS STREET ADDRESS CITY-ST-7IP WILMINGTON, DE 19801 CHY-ST-ZIP TITLE ☐ Delete THEF ☐ Change ☐ Addition PROTOKOWICZ, DANIEL NAME NAME 300 DELAWARE AVE., SUITE 571 STREET ADDRESS STREET ADDRESS CITY - ST- ZIP WILMINGTON, DE 19801 CITY - ST- ZIP THILE ☐ Delete TITLE ☐ Change ■ Addition LANE, DARRELL K NAME STREET ADDRESS 300 DELAWARE AVE., #577 STREET ADDRESS CITY-ST-ZIP WILMINGTON, DE 19801 CITY-ST-ZIP THLE ☐ Delete TITLE Change ☐ Addition NAME KNIGHT, RICHARD P NAME STREET ADDRESS 7048 GOLDEN GATE DR. STREET ADDRESS City-St-7iP FORT WORTH, TX 76132 CITY-ST ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-07

Daylene Phone #

**FILED**