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FROM SO STREET 7704468776

FILED
Aug 07, 2006 8:00 am
Secretary of State

08-07-2006 90044 047 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F0100005315			
1. Entity Name PYRAMID LEASING, INC. OF GEORGIA			
Principal Place of Business 534 MARY McLEOD BETHUNE BLVD. DAYTONA BEACH, FL 32114		Mailing Address 1570 SCARBOROUGH RD COLLEGE PARK, GA 30349	
2. Principal Place of Business 534 M M Bethune Blvd		3. Mailing Address 4570 SCARBOROUGH RD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Daytona Beach Fla		City & State College Park Ga 30349	
Zip 32114		Country USA	
4. FEI Number 58-2527234		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent POWELL, WILLIE R 536 WALNUT ST STE A DAYTONA BEACH, FL 32114		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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006		8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO POWELL, WILLIE R 536 WALNUT ST (A) DAYTONA BEACH, FL 32114 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO POWELL, WILLIE R 4290 JAILETTE RD COLLEGE PARK, GA 30349 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(CFO) Powell, W. H. R ☒ Change ☐ Addition College Park Ga 30349
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOUNTAIN, FINDREA Y 4290 JAILETTE RD COLLEGE PARK, GA 30349 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(S) Fountain, Andrea Y ☒ Change ☐ Addition 30349 4570 SCARBOROUGH RD College Park Ga
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICHARDSON, RONALD 536 WALNUT ST (B) DAYTONA BEACH, FL 32114 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(T) Richardson, Ronald ☒ Change ☐ Addition 534 MARY McLEOD BETHUNE BLVD Daytona Beach Fla 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <u>Willie R Powell</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
		Date Daytime Phone #	

50024554



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