

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000392

FILED  
Feb 06, 2007  
Secretary of State

Entity Name: CAPITAL LEASE, INC.

## Current Principal Place of Business:

800 BRICKELL AVENUE  
SUITE 550  
MIAMI, FL 33137

## New Principal Place of Business:

## Current Mailing Address:

800 BRICKELL AVENUE  
SUITE 550  
MIAMI, FL 33137

## New Mailing Address:

FEI Number: 95-4638617

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: KARAN, IAN K  
Address: HARVESTENUNDER WEG 18  
City-St-Zip: 20148 HAMBURG, GERMANY,

Title: T ( ) Delete  
Name: MOELLER, CHRISTOPHER  
Address: HARVESTENUNDER WEG 18  
City-St-Zip: 20148 HAMBURG, GERMANY,

Title: S ( ) Delete  
Name: PAIVA, CLAUDIO  
Address: 800 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33137

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MD (X) Change ( ) Addition  
Name: ROCHA, MARCUS  
Address: 800 BRICKELL AVE STE 550  
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change ( ) Addition  
Name: PAIVA, CLAUDIO  
Address: 800 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Change (X) Addition  
Name: POON, LULU  
Address: 1107 WEST TOWER SHUN TAK CENTRE  
City-St-Zip: 200 CONNAUGHT ROAD CENTRAL, HK

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAVIDANIA PENA

A

02/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date