2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

F02000001269 DOCUMENT

Principal Place of Business
C/O ML LEASING EQUIPMENT CORP.

95 GREENE STREET

JERSEY CITY NJ 07302

Suite, Apt. #, etc.

2. Principal Place of Business

WORLD FINANCIAL CTR-23PD

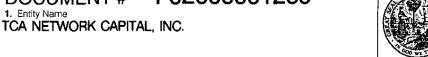
C T CORPORATION SYSTEM

PLANTATION FL 33324

SIGNATURE

1200 SOUTH PINE ISLAND ROAD

the obligations of registered agent.



6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Mailing Address

95 GREENE STREET

3. Mailing Address

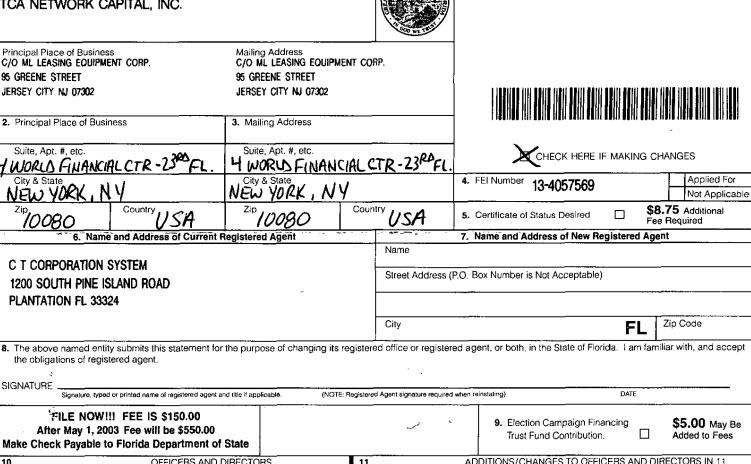
Suite, Apt. #, etc.

JERSEY CITY NJ 07302



FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90124 008 ***150.00



Make Check	Payable to Florida Department of State							
10.	OFFICERS AND DIRECTO	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD BROWN, JAMES A 95 GREENE STREET JERSEY CITY NJ 07302	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		FINANCIAL (ORK, NY 1			☐ Addition
TITLE NAME Street address City-St-Zip	D Conley, Frank J 95 Greene Street Jersey City NJ 07302	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		FINANCIAL C DRK, NY 10		Change 3RA FLOOR	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Fuhs, William R 95 Greene Street Jersey City NJ 07302	Delete	TITLE - NAME STREET ADDRESS CITY-ST-ZIP		DRK NY 10			☐ Addition (
TITLE NAME Street Address City-St-Zip	D LANE, CLINTON W 95 GREENE STREET JERSEY CITY NJ 07302	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4 world	SELNANCIAL	CENTER -	Change 23RD FLOC	□ Addition
TITLE NAMÉ STREET ADORESS 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 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:

Daytime Phone #