

F02000003537
TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S. R. ANTHONY + ASSOCIATES, INC.
(Name of Corporation - must include suffix)

800006312288--3
-07/10/02-01050-003
*****78.75 *****78.75

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SAMUEL RAY ANTHONY
(Name of Person)
S. R. ANTHONY + ASSOCIATES, INC.
(Firm/Company)
1624 E. SUNRISE BLVD
(Address)
FT. LAUDERDALE, FL. 33304
(City/State and Zip code)

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2002 JUL 10 AM 8:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SAMUEL RAY ANTHONY at (954) 463-1700
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee & Certificate of Status
☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

J. BRYAN JUL 11 2002

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. S. R. ANTHONY AND ASSOCIATES, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. PENNSYLVANIA
(State or country under the law of which it is incorporated)

3. 25-1817299
(FEI number, if applicable)

4. July 1, 1998
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. "UPON QUALIFICATION"
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1624 E. SUNRISE BLVD, FT. LAUDERDALE, FL. 33304
(Principal office address)

1624 E. SUNRISE BLVD, FT. LAUDERDALE, FL. 33304
(Current mailing address)

8. AUTO LEASING
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

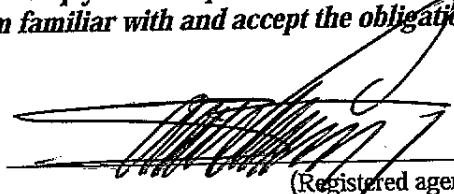
Name: SAMUEL R. ANTHONY

Office Address: 1624 E. SUNRISE BLVD

FT. LAUDERDALE, Florida 33304
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SAMUEL RAY ANTHONY

Address: 1624 E. Sunrise Blvd
Ft. Lauderdale, FL 33304

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: SAMUEL RAY ANTHONY

Address: 1624 E. Sunrise Blvd
Ft. Lauderdale, FL 33304

Vice President: MARK ECHNER

Address: 1401 NE 10th St
Pompano Beach, FL

Secretary: ERIC ANTHONY 33060

Address: 2 Allegheny County Airport, West Mifflin, PA 15122

Treasurer: NATALIE ANTHONY

Address: 2 Allegheny County Airport, West Mifflin PA 15122

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. SAMUEL R. ANTHONY Chairman

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JULY 08, 2002

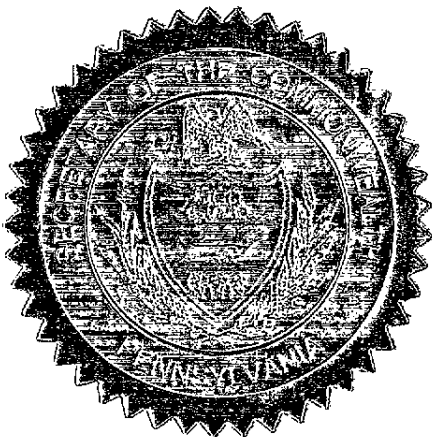
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

SR ANTHONY AND ASSOCIATES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania
and remains a subsisting corporation so far as the records of this office
show, as of the date herein.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's
Office to be affixed, the day
and year above written.

C. Michael Stewart

Secretary of the Commonwealth

DPOS