


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90208 004 \*\*\*150.00

|   |   |
|---|---|
| <b>DOCUMENT # F03000003145</b>                    |  |
| 1. Entity Name<br>YZ AIRPLANE LEASING CORPORATION |   |

|   |   |
|---|---|
| Principal Place of Business<br>19700 SE MACK DAIRY RD.<br>JUPITER, FL 33478 | Mailing Address<br>19700 SE MACK DAIRY RD.<br>JUPITER, FL 33478 |
|---|---|

|  |                     |
|--|---------------------|
| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address  |
| Suite, Apt. #, etc.                            | Suite, Apt. #, etc. |
| City & State                                   | City & State        |
| Zip  | Country             |

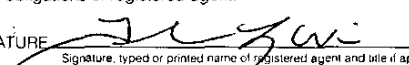


04052007 Chg-P CR2E034 (12/06)

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|-----------------------------|--|
| 4. FEI Number<br>62-1550777 | Applied For<br><input type="checkbox"/> Not Applicable |
|-----------------------------|--|

|   |                                |
|---|--------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|--------------------------------|

|  |   |
|--|---|
| 6. Name and Address of Current Registered Agent<br><br>WEISE, THEODORE L<br>2392 APPALOOSA TRAIL<br>WELLINGTON, FL 33414 | 7. Name and Address of New Registered Agent<br>Name WEISE, THEODORE L<br>Street Address (P.O. Box Number is Not Acceptable)<br>19700 SE MACK DAIRY ROAD<br>City JUPITER FL Zip Code 33478 |
|--|---|

|   |      |
|---|------|
| 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  THEODORE L. WEISE PRES. 4-11-07   | DATE |

|   |  |
|---|--|
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2007 Fee will be \$550.00</b> | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|--|

| 10. OFFICERS AND DIRECTORS                         |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|--|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | CP<br>WEISE, THEODORE L<br>2392 APPALOOSA TRAIL<br>WELLINGTON, FL 33414 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP    | CP<br>WEISE, THEODORE L<br>19700 SE MACK DAIRY ROAD<br>JUPITER, FL 33478 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | VCS<br>WEISE, SHARON<br>2392 APPALOOSA TRAIL<br>WELLINGTON, FL 33414 <input type="checkbox"/> Delete    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP    | VCS<br>WEISE, SHARON<br>19700 SE MACK DAIRY ROAD<br>JUPITER, FL 33478 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP    | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP    | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP    | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP    | <input type="checkbox"/> Change <input type="checkbox"/> 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:  THEODORE L. WEISE 4-11-07 561-745-4144 | DATE | DAYTIME PHONE # |
|---|------|-----------------|