2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F03000003145

1. Entity Name

YZ AÍRPLANE LEASING CORPORATION



Principal Place of Business

19700 SE MACK DAIRY RD. JUPITER, FL 33478

Mailing Address

19700 SE MACK DAIRY RD. JUPITER, FL 33478

FILED Apr 01, 2008 08:00 Al Secretary of State



03042008

No Chg-P

CR2E034 (11/05)

4. FEI Number 62-1550777

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

WEISE, THEODORE L 19700 SE MACK DAIRY ROAD JUPITER, FL 33478

SIGNATURE

DO NOT WRITE IN THIS SPACE

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 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of rionds. Talk liabilitiativitif, and accept the obligations of registered agent. 						
SIGNATURE Signature, typed or printed name of registered agont and title if applicable (NOTE Registered Agont signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-SI-ZIP	CP WEISE, THEODORE L 19700 S.E. MACK DAIRY ROAD JUPITER, FL 33478				U00000877101 04/11/08-80100-015 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCS WEISE, SHARON 19700 S.E. MACK DIARY ROAD JUPITER, FL 33478					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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.						

THEODORE L. WERSE

NAME OF SIGNING OFFICER OR DIRECTOR