FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Secretary of State DIVISION OF CORFORATIONS

1996

DOCUMENT #
1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

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CAMERON LEASING CORP.

Principal Place of Business Mailing Address 2937 SW 27TH AVE., SUITE 101 2937 SW 27TH AVE., SUITE 101 COCONUT GROVE FL 33133 COCONUT GROVE FL 33133



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 \Box

3a. Date of Last Report

05/01/1995

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

59-2178873

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

02/26/1982

4. FEI Number

Zip	Country	Zip	Country	Dountry		8. This corporation has liability for intangible tax under s. 199,032,
24	25 29		30	30		Florida Statutes Yes No
	Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent		
			81		Name	
Lange, Karl G					Stroot Address	is (P.O. Box Number is Not Acceptable)
2937 SW 27TH AVE., SUITE 101					Siree: Addres	is (C.O. box number is not Acceptable)
COCONUT GROVE FL 33133				T		
				\vdash		
			84		City	FL 85 Zip Code
11. Pursuant to or registere familiar wit	o the provisions of Sections 607,0502 a ed agent, or both, in the State of Fiorida n, and accept the obligations of, Sectio	and 607.1508, Florida Statut I. Such change was authoriz In 607.0505, Florida Statutes	les, the above rized by the corps.	nar Oora	med corporati ation's hoard	on submits this statement for the purpose of changing its registered office of directors. Thereby accept the appointment as registered agent. I am
SIGNATURE	<u> </u>					
12.	Strature, typed or printed having of regionary agent as OFFICERS AND		St. Figured Ages	of s	gnature required w	
THILE	PTD	L'IRECTORS L'IDELETE	13.		₋	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	LANGE, KARL C.		1 1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	2937 SW 27TH AVE., #101		1.2 NAME			
CITY-S1-ZIP	COCONUT GROVE FL		1 3 STREET	AD	ORESS	
TITLE	S S	DELETE	14 CITY - S	i I - Z	ZIP	
NAME	LANGE, KARL C.	[] bittit	2 1 TITUE			☐ Change ☐ Addition
STREET ADDRESS	2937 SW 27TH AVE., #101		2.2 NAME			
CITY-ST-ZIP	COCONUT GROVE FL		2.3 STREET	ΑĐ	DRESS	
TITLE	V	Fil DELETE	2.4 CITY - SI	1.2	PIF .	
NAME	LANGE, KARL C	DELETE	3 1 11111.5			Change Addition
STREET ADDRESS	2937 SW 27TH AVE., #101		3.2 NAMÉ			
CITY-ST-ZIP	COCONUT GROVE FL		33 STREET		ļ	
TITLE	COCONOT GROVE FL	DELETE	3.4 CITY - S ³	7 7	TIP .	
NAME		□ pereit	4. I TITLE		1	☐ Change ☐ Addition
STREET ADDRESS			4.2 NAME			
City - ST - ZiP			4.3 STREET			
TiTLE		☐ DELETE	4.4 CITY - ST	T - Z	<u> </u>	
NAME		Dutter	5 TITLE			Change Addition
STREET ADDRESS			5.2 NAME			
C-TY-ST-Z-P			5 3 STREET A			
TITLE		□ DELETE	5.4 CITY - \$1	- 7	IF	
NAME		□ ntreit	6 1 TIFLE			☐ Change ☐ Addition
STREET ADDRESS			6 2 NAME			
CITY - ST - ZIP			63 STHEFT A			
	certify that the information supplied with	the flips and at a first	64CHY ST			
certify that t	the information indicated on this annual am an officer or director of the corporat Block 12 or Block 13 if changed, or or	report or supply postal and	rai reducir is true			nd exemption stated in Section 119.07(3)(k), Fiorida Statutes. I further and Inal my signature shall have the same legal effect as if made under port as required by Chapter 607, Florida Statutes; and that my name.