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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F71207

(7)

NORTH AMERICAN EQUIPMENT LEASING, INC.

Principal Place of Business 11225 SW 50 TRR MIAMI FL 33165 Mailing Address

11225 SW 50 TRR MIAMI FL 33165

FILED May 07 1997 8:00am Secretary of State



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						3. Date Incorporated or Qual	fied 3	a. Date		Report
						03/16/1982		05/01/		······································
	ace of Business		ailing Address			4. FEI Number				oplied For
21		26				59-2207065				ot Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.		5. Certificate of Status Desire	d 🗀) :		Additional equired	
City & State	0		ity & State			6. Election Campaign Financ	ina	********	\$5.00	May Be
23		28				Trust Fund Contribution]		to Fees
Zip	Country	Z	ip	Cour	ntry	8. This corporation has liabilit	v for intar	oible tax		
24	25	29		30		Florida Statutes	☐ Y€			
<u>1</u>	9. Name and Address of Curre		ed Agent			10. Name and Address of Ne	w Regist	ered Age	ent	
RALI	LESTAS, GUSTAVO				81 Name			•	_	
			•	}	60 Octob	Address (D.O. Day N. Janes in No. A.				
11225 SW 50 TRR MIAMI FL 33165					82 Street	Address (P.O. Box Number is Not Acc	eptable)			
MIA	MI FL 33 103			ŀ	83					
				}	84 City				35 Zip	Code
								FL		
office or r	egistered agent, or both, in the State	e of Florida	Such change was	authorized	t by the cor	corporation submits this statement for poration's board of directors. I hereby	the purp accept th	ose of ch e appoin	anging i tment as	ts registered registered
agent La	m familiar with, and accept the oblig	gations of, S	ection 607.0505, F	lorida Stati	utes.					
SIGNATURE	Signature, typed or por two name of registered ag	jont and tile it a	ppicable. (NO	TE Registered	Agent signature	e required when reinstating)	t	ATE		
12.	OFFICERS AN	ND DIRECTO	ORS	13.		ADDITIONS/CHANGES TO	OFFICER	S AND D	RECTO	RS IN 12
31111	DO.								- AL	Addition
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I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the lam 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. BALLOTAS

PASS. 4/30/9.