

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000006056

Entity Name: AESOP LEASING CORP.

FILED  
Jan 11, 2005  
Secretary of State

## Current Principal Place of Business:

48 WALL STREET  
NEW YORK, NY 10005

## New Principal Place of Business:

## Current Mailing Address:

1 CAMPUS DRIVE  
WING 3B - LEGAL DEPT.  
PARSIPPANY, NJ 07054 US

## New Mailing Address:

FEI Number: 13-3795136      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: CHRISTIANSEN, DEAN A  
Address: 48 WALL STREET 27TH FLOOR  
City-St-Zip: NEW YORK, NY 10005

Title: V ( ) Delete  
Name: HUBER, JOSEPH  
Address: 1 CAMPUS DRIVE  
City-St-Zip: PARSEPPANY, NJ 07054

Title: D ( ) Delete  
Name: TABACHHI, JAMES M  
Address: 48 WALL STREET  
City-St-Zip: NEW YORK, NY 10005

Title: AT ( ) Delete  
Name: ASHMORE, TARA  
Address: 6 SYLVAN WAY  
City-St-Zip: PARSEPPANY, NJ 07054

Title: D ( ) Delete  
Name: SCHUIT, JASON E  
Address: 48 WALL STREET 27TH FLOOR  
City-St-Zip: NEW YORK, NY 10005

Title: VSAT ( ) Delete  
Name: GEBRON, LORI  
Address: 48 WALL STREET  
City-St-Zip: NEW YORK, NY 10005

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH HUBER

V

01/11/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date