

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000005314 (8)

1. Corporation Name

CENTAUR LEASING COMPANY, INC.



Principal Place of Business

Mailing Address

5200 TOWN CENTER CIRCLE, 4TH FLOOR  
BOCA RATON FL 33486

5200 TOWN CENTER CIRCLE, 4TH FLOOR  
BOCA RATON FL 33486

3. Date Incorporated or Qualified

3a. Date of Last Report

10/31/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the individual or registered agent and the applicable

(the Registered Agent's signature required when re-registering)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MANDOR, ROBERT	
STREET ADDRESS	5200 TOWN CENTER CIRCLE, 4TH FLOOR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	SRV	<input type="checkbox"/> DELETE
NAME	SHORE, HARVEY	
STREET ADDRESS	5200 TOWN CENTER CIRCLE, 4TH FLOOR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	SRVT	<input type="checkbox"/> DELETE
NAME	LEVINE, JOAN	
STREET ADDRESS	5200 TOWN CENTER CIRCLE, 4TH FLOOR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	LEVINE, JOHN	
STREET ADDRESS	5200 TOWN CENTER CIRCLE, 4TH FLOOR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	V	<input type="checkbox"/> DELETE
NAME	OTTO, JOSEPH	
STREET ADDRESS	5200 TOWN CENTER CIRCLE, 4TH FLOOR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MANDOR, LEONARD	
STREET ADDRESS	5200 TOWN CENTER CIRCLE, 4TH FLOOR	
CITY-ST-ZIP	BOCA RATON FL 33486	

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Mandor

6/14/96

(407) 394-9533

CR2E034 (3/96)