


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # F95000005314 1. Entity Name CENTAUR LEASING COMPANY, INC.	
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Principal Place of Business 200 CONGRESS PARK DR STE 103 DELRAY BEACH, FL 33445 US	Mailing Address 200 CONGRESS PARK DR STE 103 DELRAY BEACH, FL 33445 US
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DO NOT WRITE IN THIS SPACE



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0621522	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MANDOR, ROBERT 200 CONGRESS PARK DR STE 103 DELRAY BEACH, FL 33445
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V OTTO, JOSEPH 200 CONGRESS PARK DR STE 103 DELRAY BEACH, FL 33445
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MANDOR, LEONARD 200 CONGRESS PARK DR STE 103 DELRAY BEACH, FL 33445
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02/06/04-80029-015 150.00

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12. I 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 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.

SIGNATURE: Robert Mandor 1/27/2004 (561) 394-9260

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #