FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DOCUMENT #
1. Corporation Name

Secretary of State 1998 DIVISION OF CORPORATIONS F9600000339 (9)

FILED

Jan 16 1998 8:00am

ROYAL PALM EQUIPMENT LEASING, INC.					
1				O H aringo an io Haine Orini Comin Ponin Acent Ponin	<u> </u>
Principal Place	ce of Business	Mailing Address			
3700 NORTHWEST 124TH STREET P O BOX 8784					
122 CORAL SPRINGS FL 3		33075			
CORAL SPRINGS FL 33065 US				DO NOT WRITE IN 1HI	S SPACE
US				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		01/19/1996 4. FEI Number	
21	THE STATE OF THE S	26		65-0651303	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	···	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zιp	Country	8. This corporation owes or has paid the c	
24	25 25 Name and Address of Current	[29]	30	Personal Property Tax due June 30.	∐ Yes ∐ No
		negistered Agent	81 Name	10. Name and Address of New Registere	d Agent
SIEBOLD, JAMES			TVanic		ļ
3700 NORTHWEST 124TH STREET CORAL SPRINGS FL 33065			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
CONAL STRINGS PL 33000			83	THE RESERVE THE PROPERTY OF TH	
1					
1			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	rtes, the above-named cor	poration submits this statement for the purpose alion's board of directors. I hereby accept the ap	of changing its registered
office or i	registered agent, or both, in the State i im familiar with, and accept the obliga	of Honda. Such change was tions of, Section 607.0505, F	authorized by the corpora forida Statutes.	tion's board of directors. I hereby accept the ap	opointment as registered
SIGNATURE					
	Signature, typed or priviled name of registered ager		TE: Registered Agent signature requ		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
NAME	SIEBOLD, WILLIAM	L DELETE	1.1 TALE		Change Addition
STREET ADDRESS	4859 CHARDONNAY DR.		1.2 NAME		
CITY-ST-ZIP	CORAL SPRINGS FL 33067		1.3 STREET ADDRESS		
THLE	VSTD	DELETE	1.4 CHY+S1-2IP 2 1 100.6		Change Addition
NAME	SIEBOLD, JAMES		2.2 NAME		7 10000
STREET ADDRESS	439 COCONUT CIR		2.3 STREET ADDRESS		
CITY-ST-ZIP	WESTON FL		2 4 CITY - ST (ZIP)		33326
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	 		3.4. CITY - \$1 - ZIP		
TITLE		DELFTE	4.1 11TLF		Change Addition
NAME	ı		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 CITY - ST - 7IP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME CIRCLI ADDOCCC			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change
NAMÉ					☐ Change ☐ Addition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			6.3 STREET ADDRESS		
001 00 20		· ····	6.4 CHY - S1 - ZIP		

14. Thereby 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; 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 12 or Block 13 if changed, or on an attachment with an address.

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