2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 02, 2004 8:00 am Secretary of State DOCUMENT # F98000004014 04-02-2004 90033 029 ***150.00 1. Entity Name UNIVERSAL COMMERCIAL CREDIT LEASING V. INC. Principal Place of Business Mailing Address 14651 DALLAS PARKWAY 14651 DALLAS PARKWAY STE. 500 STE. 500 DALLAS, TX 75254 DALLAS, TX 75254 2. Principal Place of Business 3. Mailing Address 4001 INTERNATIONAL PARKWAY 4001 INTERNATIONAL PARKWAY Suite, Apt. #, etc. Suite, Apt. #, etc. 03022004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For CARROLLTON, TX CARROLLTON, TX 51-0382457 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 75007 75007 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT-CORPORATION SYSTEM: --C/O CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 City 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 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE " 🔀 Delete TITLE M Change ☐ Addition GEDEGES LE MENER MALJEAN, JEAN F NAMÉ NAME STREET ADDRESS 245 PARK AVE 4001 INTERNATIONAL PARKWAY STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10167 CITY-ST-ZIP CARROLLTON, TX 75007 TITLE TITLE Delete ☐ Change **Addition** CLIVIER POIROT NAME COHEN, BENJAMIN NAME 4001 INTERNATIONAL PARKWAY TOUR MAINE MONTPARNASSE 33 AVE DU MAINE STREET ADDRESS STREET ADDRESS CITY-ST-7IP 75755 PARIS CEDEX LS FRANCE. CARROLLTON, TX 75007 CITY - ST - ZIP TITLE Delete TITLE **X** Change ☐ Addition CROZIER, BARRY A NAME NAME 1011 CENTRE RD, SWITE 310 STREET ADDRESS 300 DELAWARE AVE., STE 571 STREET ADDRESS CITY-ST-7IP... -WILMINGTON, DE--- -CITY-ST-ZIP ... WILMINGTON, DE 19805 -TITLE Delete TITLE Change ☐ Addition NARRELL K. LANE CONNER, EILEEN T NAME NAME 1011 CENTRE RD, SWITE 310 STREET ADDRESS 300 DELAWARE AVE., STE 571 STREET ADDRESS CITY-ST-ZIP WILMINGTON, DE CITY-ST-7IP WILMINGTON, DE 19805 TITLE Change Delete TITLE ☐ Addition NAME PROTOKOWICZ, DANIEL NAME 300 DELAWARE AVE., STE 571 IOIL CENTRE RD, SWITE 30 STREET ADDRESS STREET ADDRESS WILMINGTON, DE CITY-ST-7IP CITY-ST-ZIP WILMINGTON, DE 1980S TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP

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

SIGNATURE:

FILED