



2005 FOR PROFIT CORPORATION
ANNUAL REPORT

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| DOCUMENT # F98000006484 | |  |
| 1. Entity Name TOUAX CONTAINER LEASE RECEIVABLES CORPORATION | | |
| Principal Place of Business % GOLD CONTAINER CORPORATION 2137 JACKSONVILLE ST. FT. MYERS, FL 33931 | | Mailing Address % GOLD CONTAINER CORPORATION 2137 JACKSONVILLE ST. FT. MYERS, FL 33931 |
| DO NOT WRITE IN THIS SPACE | | |
| | |  03082005 No Chg-P CR2E034 (10/03) |
| | | 4. FEI Number 22-3588607 Applied For Not Applicable |
| | | 5. Certificate of Status Desired <input checked="" 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 | | DO NOT WRITE IN THIS SPACE |
| 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, 2005 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP WALEWSKI, ALEXANDRE 2137 JACKSONVILLE ST. FORT MYERS, FL 33916 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WALEWSKI, FABRICE 2137 JACKSONVILLE ST. FORT MYERS, FL 33916 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CURLEY, STEPHEN C 237 PARK AVE. FORT MYERS, FL 33916 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
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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)(f), 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: <u>Fabrice WALEWSKI</u> 03/08/05 (786) 777-0711 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # | | |