

FILE NOW: FILING FEE AFTER MAY 1ST IS \$650.00

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F98000007058 1. Corporation Name F.Y.I. LEASING CORPORATION			
Principal Place of Business 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204		Mailing Address 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
3. Date Incorporated or Qualified 12/23/1998		4. FEI Number 51-0385990	
5. Certificate of Status Desired ☐		6. Election Campaign Financing Trust Fund Contribution ☐	
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No		8. \$8.75 Additional Fee Required 9. \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent UNITED CORPORATE SERVICES 801 NORTHEAST 187TH STREET, SUITE 300 NORTH MIAMI BEACH FL 33162		10. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	PD BOWMAN, ED 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	S LEBENBERG, MARGOT 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	DV LOWENSTEIN, DAVID 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	CFO BARKER, TIMOTHY 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	C WALKER, THOMAS C 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	AS CRUZ, JACQUELINE 3232 MCKINNEY AVENUE, SUITE 900 DALLAS TX 75204	6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: DAVID J. LOWENSTEIN FEB 5 1999 (214) 953-7555
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Deponent Phone #

CR2E034 (11/98)