



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90328 013 ***150.00

DOCUMENT # F99000003624 1. Entity Name UNIVERSAL COMMERCIAL CREDIT LEASING VII, INC.					
Principal Place of Business 4001 INTERNATIONAL PKWY. CARROLLTON, TX 75007			Mailing Address 4001 INTERNATIONAL PKWY. STE 500 CARROLLTON, TX 75007		
2. Principal Place of Business 300 Delaware Avenue Suite, Apt. #, etc. 571 City & State Wilmington DE Zip 19801		3. Mailing Address 300 Delaware Avenue Suite, Apt. #, etc. 571 City & State Wilmington DE Zip 19801			
4. FEI Number 51-0390858		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		
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 _____ <small>Signature, typed or printed name of registered agent and state if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MENER, GEORGES L <input type="checkbox"/> Delete 4001 INTERNATIONAL PKWY. CARROLLTON, TX 75007		TITLE NAME STREET ADDRESS CITY-ST-ZIP	LE MENER, GEORGES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4001 International parkway Carrollton, TX 75007	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CROZIER, BARRY A <input type="checkbox"/> Delete 1011 CENTRE RD., STE 310 WILMINGTON, DE 19805		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CROZIER, BARRY 300 Delaware Avenue, Suite 571 Wilmington, DE 19801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LANE, DARRELL K <input type="checkbox"/> Delete 1011 CENTRE RD., STE 310 WILMINGTON, DE 19805		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition LANE, DARRELL 300 Delaware Avenue, Suite 571 Wilmington, DE 19801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, BENJAMIN <input type="checkbox"/> Delete TOUR MAINE MONTP 33 AVE DU MAINE PORIS CEDEX 15, FR 75755		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PROTOKOWICZ, DANIEL <input type="checkbox"/> Delete 1011 CENTRE RD., STE 310 WILMINGTON, DE 19805		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PROTOKOWICZ, DANIEL 300 Delaware Avenue, Suite 571 Wilmington, DE 19801	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, STEVE <input type="checkbox"/> Delete 604 EAST 4TH ST., STE 201 FORT WORTH, TX 76102		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Barry A. Crozier</u> <small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>4/21/05</u> 302-427-7608 <small>Date Daytime Phone *</small>		