

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004974

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: TOUAX EQUIPMENT LEASING CORPORATION

## Current Principal Place of Business:

% GOLD CONTAINER CORP.  
2137 JACKSONVILLE STREET  
FT. MYERS, FL 33931

## New Principal Place of Business:

GOLD CONTAINER CORP.  
2137 JACKSONVILLE STREET  
FT. MYERS, FL 33931

## Current Mailing Address:

% GOLD CONTAINER CORP.  
2137 JACKSONVILLE STREET  
FT. MYERS, FL 33931

## New Mailing Address:

GOLD CONTAINER CORP.  
2137 JACKSONVILLE STREET  
FT. MYERS, FL 33931

FEI Number: 51-0408866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WALEWSKI, ALEXANDRE  
Address: 5 RUE BELLINE  
City-St-Zip: PUTEAUX-LA-DEFENSE, FRANCE,

Title: VD ( ) Delete  
Name: WALEWSKI, FABRICE  
Address: 5 RUE BELLINE  
City-St-Zip: PUTEAUX-LA-DEFENSE, FRANCE,

Title: D ( ) Delete  
Name: WALEWSKI, RAPHAEL  
Address: 5 RUE BELLINE  
City-St-Zip: PUTEAUX-LA-DEFENSE, FRANCE,

Title: D ( ) Delete  
Name: IMPERIALE, MICHAEL A  
Address: 5 RUE BELLINE  
City-St-Zip: PUTEAUX-LA-DEFENSE, FRANCE,

Title: D ( ) Delete  
Name: FAJT, MIROSLAV  
Address: 237 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10017

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FIROOZEH FARHANG - CHIEF ACCOUNTANT

MISS

02/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date