

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 5:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G08975 (6)

1. Corporation Name

~~GCF COMMERCIAL ENTERPRISES, INC.~~
APPLIXE LEASING CORPORATION

Principal Place of Business

1520 NW 107 DRIVE
CORAL SPRINGS FL 33071

Mailing Address

1520 NW 107 DRIVE
CORAL SPRINGS FL 33071

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/18/1982

3a. Date of Last Report
05/01/1994

4. FEI Number
65-1034449

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under § 199.032,
Florida Statutes ☐ Yes ☐ No

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

10. Name and Address of New Registered Agent

01. Name

02. Street Address (P.O. Box Number is Not Acceptable)

03

04. City

FL

05. Zip Code

FORBES, CARLTON G.
1520 NW 107 AVENUE
CORAL SPRINGS FL 33071

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

[Signature]

(NOTE: Registered Agent signature required when registering)

4/29/95
DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PTS
FORBES, CARLTON G.
1520 NW 107 DRIVE
CORAL SPRINGS FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

500001484545
-05/11/95--01090--002
****400.00 ****200.00

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 applicable, or as an attachment with an address.

SIGNATURE:

[Signature]

(Signature and typed or printed name of signing officer or director)

CARL FORBES

4/29/95

305-753-1090