2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G30896

FILED Feb 15, 2008 Secretary of State

Entity Name: AMERICANA SERVICES & LEASING CORPORATION

Current Principal Place of Business:		New Principal Place of Business:		
	FSTREETS EL 33619 US	3		
Current Mailing Address:		New Mailing Address:		
907 W. K AMPA, F	(ENNEDY BLVI L 33606 US			
El Number	: 59-2281587	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
907 WES	RA, MICHAEL ST KENNEDY E	BLVD		
AIVIPA, F	L 33606 US	5		
he above			ourpose of changing its registere	ed office or registered agent, or both,
TAMPA, F The above on the State	e named entity s e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	e named entity s e of Florida. RE:			ed office or registered agent, or both, Date
he above the State	e named entity s e of Florida. RE:Electron	submits this statement for the p		
he above the State GNATU	e named entity s e of Florida. RE:Electron	submits this statement for the particle is statement for the parti	ent	
he above the State IGNATU	e named entity se of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Age Trust Fund Contribution (). TORS: Delete ES J. EEET S	ent	Date
he above the State IGNATUI	e named entity se of Florida. RE: Electron mpaign Financing S AND DIREC DPV () MURPHY, JAMI 2032 51ST STE TAMPA, FL 336	ic Signature of Registered Age Trust Fund Contribution (). TORS: Delete ES J. EEET S E19 US Delete A, EEET S	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: MICHAEL D. LABARBERA AS 02/15/2008