FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G53213

(6)

TREND LEASING CORP.

Apr 07 1998 8:00am						
Secretary of State						

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2. Principal Place of Business 2. Moleting Address 2. Moleting Address 3. El Montago 5.9-2320626 No. Applicable No. Appl	US		US			5 SPACE
Application					•	
20	2. Principal Pl	face of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite	21		26		59-2320626	· · · · · · · · · · · · · · · · · · ·
City & State City & Country Zig	Suite, Apt	#, etc	Suite, Apt. #, etc		<u></u>	\$8.75 Additional
28					5. Certificate of Status Desired	Fee Required
28	City & State	}	**1		· · · · · · · · · · · · · · · · · · ·	
10, Name and Address of New Registered Agent 10, Name and Address of New Registered Agent 10 10 10 10 10 10 10 1		F-7 ' 1				
B2 Street Address (P.O. Box Number is Not Acceptable)						
100 PINEVIEW ROAD 100	LYN	NCH, RICHARD		81 Name		
SIGNATURE Signate: better present to the provisions of Sections 607 0502 and 607 1508; Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or holds, in the State of Horida Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or holds, in the State of Horida Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the provision and femiliar with and encept the chalgations of Section 607 0505; Florida Statutos. SIGNATURE SIGNATURE SIGNATURE PSD				82 Street Add	dress (P.O. Box Number is Not Acceptable)	
### City ### Cally ### Cally #### Cally #### Cally ###################################	JUF	PITER FL 33469				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submite this statement for the purpose of changing its registered agent. In both, in the State of Liorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and ancept the chiligations of, Section 607 0505, Florida Statutos. SIGNATURE 12.]			83		
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 agent, or both, in the State of Lorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, the both, in the State of Lorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, the hoth, in the State of Lorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent at the day agent at the	1			84 City		85 Zip Code
SIGNATURE Signature And accept the challestenes of, Section 607 05:05, Florida Statutos. Page Signature required when reintaceing) DATE	## Durayant	to the provisions of Continue CO7 0/ 00 and	decoration for the decoration			
SIGNATURE	office or re	egistered agent, or both, in the State of I	lorida, Such change was a	os, the above-named co- outhorized by the corpor	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
Signature, Spread capsoned corner of registered agreed and life it agrees and market the agree and market the agrees and market the agree and market the agrees and market the agree and market the	agent lar	m familiar with, and accept the obligation	ns of, Section 607-0505, Flor	rida Statutes.		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE .	Signature, typicd or protect name of registerest meent an	rt 14ke it angérinble (NCH)	Registered Agent signature reg	uured when reinstating) DATE	
TITLE	<u> </u>			-		ND DIRECTORS IN 12
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CITY-ST-ZIP	NAME			1.2 NAME		
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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		artific that the information and set in the	hin thura drang and a salit - 4-		Parties (40.07/0V) Flydd Olyf (20.00)	

14. Thereby certify that the information supplied with this filing closs 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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.

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3-30-90

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