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

CORPORATION



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS					
DOCUI	MENT # J0228	37 (7)			
	LIGHT LEASING, INC.	• •			
				1 126 112 1111 1111 1111 1111	
Principal Place of Business		Mailing Address		- · LIGHTE DIN BAND NAME AFORM DAFA	DDD DJAM CICH BERN OLDIN DIAM BIRN HADI
2675 N.W. 5 HANGAR 51 FT. LAUDER	6TH ST Dale Fl 33309	2675 N.W. 56TH ST Hangar 51 Ft. Lauderdale Fl. 3:	3309		
·	·			3. Date Incorporated or Qualified 03/05/1986	3a. Date of Last Report 04/13/1995
2. Principal Pla 21	ace of Business	2a. Mailing Address		4, FEI Number 59-2652178	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Crty & State)	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
Zip	Country	28		Trust Fund Contribution	Added to Fees
24	25	7ip 29	Gountry 30	8. This corporation has liability for it Florida Statutes Yes	
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
MACKE	y, keith j				
2675 N.	W. 56TH ST		82 Street Add	ress (P.O. Box Number is Not Acceptabl	9)
HANGAI			83		
FI. LAU	IDERDALE FL 33309		84 City		85 Zip Code
SIGNATURE .	Signature, bysid or printed name of rightered age	ct and the if applicative (NOTE	I by the corporation's boa		Tiang
12. TOLE	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
NAME	MACKEY, KEITH J.	L1 preese	1.2 NAME		Change Addition
STREET ADDRESS	2675 N.W. 56TH ST #51		1.3 STREET ADDRESS		
CITY+ST+ZIP TITLE	FT. LAUDERDALE FL	F21 PC+F1(1.4 CITY - \$1 - 2IP		
NAME	MACKEY, RENDA	[[]] DELETE	2 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS	2675 N.W. 56TH ST #51		23 STREET ADDRESS		
CITY-ST-ZIP	FT.LAUDERDALE FL		2.4 CITY - S7 - 7IP		
THUE		DELETE	3 1 11111 F		Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-7IP			3 4 CHY-SI-ZIF		
TITLE		[] DELFTE	4. 1 TITLE		C'iange Add tion
NAME			4.2 NAME		_
STREET ADDRESS			43 STHEET ADDRESS		
CHY-S1-ZIP THLE		DELETE	5 1 TI'LE		ET Change ET Addition
NAME			5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	** *** *** *** *** *** *** *** *** ***		5.4.0(TY-SI-7)P		
IITLE		DELETE	6 1 7111.6		Change Addition
NAME PERFECT AGGREGA			62 NAME		
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS		
14. I do hereby	certify that the information supplied	with this filing is voluntarily furnish	■ 64 CITY-ST-ZIP ned and does not qualify for	or the exemption stated in Section 119.0	7(3)(k). Florida Statutes 1 further
oath: that L	u e i nomadun mulgaled oli mis ann	uai report or supplemental annua gratign or the receiver or trustee a	report is true and accura	to and that my signature shall have the signature of the	constitution officers are if according to all the

SIGNATURE:

Scharture and typed or printed name of signing officer or direction Jendent 3/3-/16

771-6969 Digmin Photos