

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

55 MAY -1 PM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **J83994** (0)

1. Corporation Name
S & D LEASING, INC.

Principal Place of Business

% STEVEN SCHATZBERG
12008 NW 30TH STREET
CORAL SPRINGS FL 33065

Mailing Address

% STEVEN SCHATZBERG
12008 NW 30TH STREET
CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified **07/21/1987** 3a. Date of Last Report **03/30/1994**

4. FEI Number **59-2822020** 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 S. 199.032, Florida Statutes. Yes No

2. Principal Place of Business 2a. Mailing Address
21 **4244 N.W. 83RD LANE** 25 **4244 N.W. 83RD LANE**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22
23 City & State **CORAL SPRINGS, FL** 27 City & State **CORAL SPRINGS, FL**
24 **33065** 28 **33065** Country **USA** 29 **33065** 30 **USA**

9. Name and Address of Current Registered Agent

FREEDMAN, RANDY R.
888 S.E. THIRD AVENUE
SUITE 400
FORT LAUDERDALE FL 33318

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 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 of Registered Agent

Signature of New Registered Agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE	S
NAME	ZIMMERMAN, DAVID
STREET ADDRESS	6363 HARBOR BEND
CITY, ST, ZIP	MARGATE FL
TITLE	P
NAME	SCHATZBERG, STEVEN
STREET ADDRESS	12008 NW 30 ST
CITY, ST, ZIP	CORAL SPRINGS FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	4244 NW, 83 RD LANE
2.4 CITY, ST, ZIP	CORAL SPRINGS, FL 33065
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is true and correct and that I am qualified for the position stated in Section 199.032(3)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 if checked. I am not a shareholder.

SIGNATURE:

Steven Schatzberg **STEVEN SCHATZBERG** 4-27-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR