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

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # J98157**

1. Corporation Name

PROSPECT LEASING COMPANY

111001 E	OT ELACING COMI ANT					
Principal Place	e of Business	Mailing Address			1 1901ki aris mint rales simbs ditti sant aten	1 81911 B1811 B1811 B1811 189
2675 NW 56TH STREET FT. LAUDERDALE FL 33309  2675 NW 56TH STREET FT. LAUDERDALE FL 33309					DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed	
	( Duning and	2a. Mailing Address	•		10/16/1987 4. FEI Number	Applied For
					65-0016217	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional Fee Required	
22 City & State		City & State			6. Election Campaign Financing.  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	,	This corporation owes the current year Intan Personal Property Tax.	igible □ Yes □ No
24	9. Name and Address of Current	29 30	<u>' </u>		10. Name and Address of New Registered Ag	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Madrood of New Register	,
MACKEY, KEITH J. 2675 NW 56TH STREET			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
HANGAR #51			83			
FT. LAUDERDALE FL 33309			84	City	FL	85 Zip Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Such change was auth	orized by	the corporati	poration submits this statement for the purpose of chon's board of directors. I hereby accept the appoint	nanging its registered nent as registered
	Signature, typed or printed name of registered agent	· ''		nt signature require	ad when reinstating) DATE	SIDEOTODO INI 40
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12 ☐ Change ☐ Additi
TITLE	D D	☐ DELETE	1.1 TITLE			
NAME	MACKEY, KEITH J.		1.2 NAME			
STREET ADDRESS				TADORESS		
CITY-ST-ZIP			1.4 CITY-S 2.1 TITLE	I-ZIP		☐ Change ☐ Additi
NAME	MACKEY, RENDA		2.2 NAME			_ , _
STREET ADDRESS	CONT. ARM COMM. OTOPPE			T ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-S			
TITLE	, , , , , , , , , , , , , , , , , , ,	☐ DELETE	3.1 TITLE			☐ Change ☐ Additi
NAME	• • • • • • • • • • • • • • • • • • • •		3.2 NAME		• • • •	
STREET ADDRESS				TADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	si-ZIP		☐ Change ☐ Additi
) πι∟E	I		→. I // ILE	1		

14. I hereby 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 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 it changed of or an attachment with an address, with all other like empowered.

4.2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TILLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-Z)P

CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAMES OF SIGNING OFFICER OR DIRECTOR

4/6/99 Day

Daytime Phone #

Change

☐ Change

☐ Addition

☐ Addition

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90094 019 \*\*\*150.00

(44,000)