2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084847

Entity Name: DOLLAR LEASING & MANAGEMENT, LLC

FILED Jan 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2230 STONINGTON AVE 427 BLUEJAY WAY ORLANDO, FL 32817 ORLANDO, FL 32828

Current Mailing Address: New Mailing Address:

P. O. BOX 677758 ORLANDO, FL 32867 US

FEI Number: 20-1912326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BILINGUAL EMPOWERMENT UNIVERSITY, LLC
P. O. BOX 677758
ORLANDO, FL 32867 US
MARTE, HERIBERTO J
P. O. BOX 677758
ORLANDO, FL 32867 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HERIBERTO J. MARTE 01/15/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 BILINGUAL EMPOWERMEN, T UNIVERSITY
 Name:
 MARTE, JACQUIE D

 Address:
 P. O. BOX 677758
 Address:
 P. O. BOX 677758

 City-St-Zip:
 ORLANDO, FL 32867
 City-St-Zip:
 ORLANDO, FL 32867

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 MARTE, HERIBERTO J

 Address:
 Address:
 P O BOX 678507

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32867

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACQUIE D. MARTE MGR 01/15/2007