

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000048868

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** CREDIT LEASE EQUITY LLC

**Current Principal Place of Business:**

801 ARTHUR GODFREY ROAD  
SUITE 201  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

6538 NORTH CHRISTIANA AVE  
LINCOLNWOOD, IL 60712

**New Mailing Address:**

**FEI Number:** 27-2571523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAPLAN, ROBERT  
801 ARTHUR GODFREY ROAD  
SUITE 201  
MIAMI BEACH, FL 33140 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** KAPLAN, ROBERT  
**Address:** 801 ARTHUR GODFREY ROAD, SUITE 201  
**City-St-Zip:** MIAMI BEACH, FL 33140

**Title:** MGRM  
**Name:** SOVA, ABE  
**Address:** 6538 NORTH CHRISTIANA AVENUE  
**City-St-Zip:** LINCOLNWOOD, IL 60712

**Title:** MGRM  
**Name:** SOVA, JAY  
**Address:** 4045 SHERIDAN AVENUE #299  
**City-St-Zip:** MIAMI BEACH, FL 33140

I hereby 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:** A SOVA

MGR

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date