2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L76950

Name:

Address: City-St-Zip: BARROW, ENID

7594 DOUBLETON DR.

DELRAY BEACH, FL 33446

FILED Jan 10, 2007 Secretary of State

Entity Nar	ne: M.B. LE	ASING, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	BLETON DR EACH, FL 3					
Current Mailing Address:			New Maili	New Mailing Address:		
	THDALE BL\ , 3RD FLOO _ 33624					
FEI Number:	65-0203988	FEI Number Applied For ()	FEI Number Not App	licable () Ce	rtificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
3820 NOR SUITE 110 TAMPA, FI	CHARLES THDALE BLV , 3RD FLOO _ 33624 US		ournose of changing	ts registered office	e or registered agent or both	
in the State	of Florida.	submits this statement for the	purpose or changing	is registered office	e or registered agent, or both,	
SIGNATUF						
	Electro	onic Signature of Registered Ag	ent		Date	
Election Can	npaign Financi	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BARROW, MI 7594 DOUBL		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition	
Title: Name: Address: City-St-Zip:	BARROW, C	DALE BLVD., SUITE 110, 3RD FLOOF	Title: Name: R Address: City-St-Zip:	DVP (X) Charle BARROW, CHARLE 3837 NORTHDALE TAMPA, FL 33624		
Title:	DST () Delete	Title:	() Cha	ange () Addition	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES G. BARROW DVP 01/10/2007