## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L76950

Entity Name: M.B. LEASING, INC.

FILED Mar 30, 2009 Secretary of State

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

7594 DOUBLETON DR. 7594 DOUBLETON DR

DELRAY BEACH, FL 33446 US DELRAY BEACH, FL 33446 US

Current Mailing Address: New Mailing Address:

3820 NORTHDALE BLVD. 14824 N. FLORIDA AVENUE SUITE 110, 3RD FLOOR SUITE B TAMPA, FL 33624 TAMPA, FL 33613 US

FEI Number: 65-0203988 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:

BARROW, CHARLES BARROW, CHARLES G
3820 NORTHDALE BLVD. 14824 N. FLORIDA AVENUE
SUITE 110, 3RD FLOOR SUITE B
TAMPA, FL 33624 US TAMPA, FL 33613 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: CHARLES BARROW 03/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BARROW, MERVIN
 Name:

 Address:
 7594 DOUBLETON DR.
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:

Title: DVP ( ) Delete Title: DV (X) Change ( ) Addition

Name: BARROW, CHARLES Name: BARROW, CHARLES G

Address: 3820 NORTHDALE BLVD., SUITE 110, 3RD FLOOR Address: 14824 N. FLORIDA AVE., SUITE B

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33613

Title: DST ( ) Delete Title: DS (X) Change ( ) Addition

 Name:
 BARROW, ENID
 Name:
 BARROW, ENID L

 Address:
 7594 DOUBLETON DR.
 Address:
 7594 DOUBLETON DR.

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:
 DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: CHARLES BARROW DV 03/30/2009