

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L77973

FILED  
Apr 29, 2003  
Secretary of State

Entity Name: ALL MAKE LEASING, INC.

**Current Principal Place of Business:**

7820 KENWAY PLACE, WEST  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

7820 KENWAY PLACE, WEST  
BOCA RATON, FL 33433

**New Mailing Address:**

FEI Number: 65-0211009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVINSON, AMY  
7040 W. PALMETTO PARK ROAD, SUITE 175  
BOCA RATON, FL 33433 US

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

LEVINSON, AMY  
7820 KENWAY PLACE WEST  
BOCA RATON, FL 33433 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: AMY B. LEVINSON

04/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LEVINSON, AMY B  
Address: 7820 KENWAY PLACE, WEST  
City-St-Zip: BOCA RATON, FL

Title: VD ( ) Delete  
Name: BOSTAD, ROBERT G  
Address: 7820 KENWAY PLACE, WEST  
City-St-Zip: BOCA RATON, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LEVINSON, AMY B  
Address: 7820 KENWAY PLACE, WEST  
City-St-Zip: BOCA RATON, FL 33433

Title: VD (X) Change ( ) Addition  
Name: BOSTAD, ROBERT G  
Address: 7820 KENWAY PLACE, WEST  
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AMY B. LEVINSON

PRES

04/29/2003

Electronic Signature of Signing Officer or Director

Date