## 2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # M0000001848							. "				
MAC TRAILER LEASING, L.L.C.						FILED					
Principal Plac	ce of Business	<u> </u>	ailing Address		<u> </u>	01					
ONE MAYNARD DR. PARK RIDGE NJ 07656			ONE MAYNARD DR. PARK RIDGE NJ 07656			SECRETARY OF STATE TALLAHASSEE, FLORIDA					
		· · · · · · · · · · · · · · · · · · ·									
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State			City & State			4. FEI Number 13-4127319 Applied For Not Applicable					
Zip	Country		Zip Counti			Fee Requ		00 Addition	al		
	6. Name ar	nd Address of Current Regis			ne	7. Name and Address of New Registered Agent					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Stree	Street Address (P.O. Box Number is Not Acceptable)					-	
	ION FL 33324	1									
				City	<del></del>			FL 2	ip Code		
8. The above	named entity s	ubmits this statement for the p	ourpose of changing its re	egistered offic	e or register	ed agent,	or both, in the State of Florid	la.			
SIGNATURE	Signature, typed or p	printed name of registered agent and title	f applicable. (NOTE:	Registered Agent s	ignature required	when reinstati	ng)	DATE		_	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required where the state of the signature required where required where the signature required where requir							7000045		27	-1 <sub>61</sub>	
			Make Check Payable to Department of			00/00/01 01051_0001					
9.		MANAGING MEMBERS/N	MEMBERS	10.		-	ADDITIONS/CH				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRE		H A. IAYNA	FEHRENBACH LO DRIVE GE NT 07650		Change 🗹	Addition	
TITLE		<u>:</u>  -	☐ Delete	TITLE	PRES	IDENT	T		Change 🗹	Addition	
NAME STREET ADDRESS		- <del> </del>	•	NAME >Street addre	SS   - 1 ~,	MAYNA	P. GOODRICH RD=ARIVE======			<del></del>	
CITY-ST-ZIP .		1	☐ Delete	CITY-ST-ZIP TITLE			OE, NJ 0765			Addition	
NAME			L. Delete	NAME		IES C	ESIDENT HANDLER		Change 📝	Addition	
STREET ADDRESS CITY-ST-ZIP		1		STREET ADDRE		MAYNA K RID	RD DRIVE GE NJ 076	56	•		
TITLE NAME		į .	☐ Delete	TITLE	VICE	E PR	ESIDENT		Change 🗹	Addition	
STREET ADDRESS				NAME STREET ADDRE	SS 1 4	MAYN	LOIACONO TRA DRIVE				
CITY-ST-ZIP			☐ Delete	CITY-ST-ZIP		K RI TROLL	DGE NO 076.		Change F	Addition	
NAME			Doroto	NAME	DA	NEL	DEBLASIO	<u>.</u>	gv LE	, .50(110)?	
STREET ADDRESS CITY-ST-ZIP				STREET ADDRE			ARD DRIVE IDGE NT 076	36			
TITLE		,	☐ Delete	TITLE	SECA	2ETAR	1 + GENERAL GO		hange 🗹	Addition	
NAME STREET ADDRESS				NAME STREET ADDRES		A. D. MAYN	LEACH ALD DRIVE				
CITY-ST-ZIP	ertify that the in	formation supplied with this fil	ing does not qualify for the	CITY-ST-ZIP	PAC	in R	IDGE NJ O	7656	at the inform	ation	
i inciecty c	orary area are in	roundoor subblied with tills lif	ing does not quality for the	ie exemption	SIZIOU III SEI	viigit 119.U	m (a)(i), mionida Statutes. Htul	rmer certity tha	at the informa	IAUQI1	

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the fimited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

7/24/01

(201)391-0800