

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000011801

Entity Name: C L EQUIPMENT LEASING CORP.

FILED
Jul 28, 2005
Secretary of State

Current Principal Place of Business:

2200 NW CORPORATE BLVD.
SUITE 401
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2200 NW CORPORATE BLVD.
SUITE 401
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-6089364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HCRM CORP.
2200 NW CORPORATE BOULEVARD
SUITE 401
BOCA RATON, FL 33431 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

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: DUPREY, LAWRENCE A
Address: 2200 NW CORPORATE BLVD., SUITE 401
City-St-Zip: BOCA RATON, FL 33431

Title: VTSD () Delete
Name: BALDINI, SYLVIA
Address: 2200 NW CORPORATE BLVD., SUITE 401
City-St-Zip: BOCA RATON, FL 33431

Title: CEO () Delete
Name: DUPREY, LAWRENCE A
Address: 2200 NW CORPORATE BLVD., STE 401
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: BALDINI, SYLVIA
Address: 2200 NW CORPORATE BLVD., SUITE 401
City-St-Zip: BOCA RATON, FL 33431

Title: S (X) Change () Addition
Name: GROSS, ANDREW M
Address: 2200 NW CORPORATE BLVD., STE 401
City-St-Zip: BOCA RATON, FL 33431

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: LAWRENCE A. DUPREY

C

07/28/2005

Electronic Signature of Signing Officer or Director

Date