2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

P00000021508 **DOCUMENT #**

1. Entity Name

Principal Place of Business

DOWNRITE LEASING CORPORATION

|--|

FILED May 05, 2003 8:00 am Secretary of State

05-05-2003 90389 033 ***158.75

MIAMI FL 33186 US				MIAMI FL 33186 US					
2. Principal Place of Business			3. Mai	3. Mailing Address				1 1901/1931 III Oolil oolib oolib oolib oolib oolib oolib 11031 XIEEE Eliki oolib keli keli	
Suite, Apt. #, etc.				Suite, Apt, #, etc.				☐ CHECK HERE IF MAKING CHANGES	
City & State				City & State			4, 1	FEI Number 65-1025205 Applied For Not Applied by	
Zip Country			Zip	Zip Count		try	5. (Certificate of Status Desired \$8.75 Additional Fee Required	
	6 Name	and Address of Curren	t Registere	ed Agent			7. 1	Name and Address of New Registered Agent	
						Name			
LOBUE, G	EORGEAN	٧.							
-	136 STRE					Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL									
MINIMI I L	W 100								
						City		FL Zip Code	
	ions of regist					ed office or regi		ent, or both, in the State of Florida. I am familiar with, and accept	
								T	
After	May 1, 200	! FEE IS \$150.00 3 Fee will be \$550.00 Florida Department						9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	
10. OFFICERS AND DIRECTORS 11.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST LOBUE, GEORGEANN 13001 SW 118 STREET MIAMI FL 33186			☐ Delete		E E ET ADDRESS -ST-ZIP		☐ Change ☐ Addition	
TITLE				☐ Delete	TITLE			☐ Change ☐ Addition	
NAME				Colete .	NAM			Change 700mor	
STREET ADDRESS						ET ADDRESS			
CITY-ST-ZIP					CITY	-ST-ZIP			
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NAME					NAM				
STREET ADDRESS						ET ADDRESS		-	
CITY-ST-ZIP						-ST-ZIP			
12. Thereby of indicated	ertify that the	information supplied with t or supplemental report	h this filing	does not qualify for	the exe	mption stated in	Section	119.07(3)(i), Florida Statutes. I further certify that the information egal effect as if made under path; that I am an officer or director.	

indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

305) 305-232-2310