2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT/ (UBR)

DOCUMENT #

P02000041831

1. Entity Name

FUN LEASING, INC.



Principal Place of Business	Mailing Address	
1900 LAND O'LAKES BLVD.	1900 LAND O'LAKES BLVD.	
#113-200	#113-20	
LUTZ FL 33558	LUTZ/FL 33558	
	•	

FILED Jul 31, 2003 8:00 am Secretary of State

07-31-2003 90071 012 ***150.00



LU12 FL 3353	X 8	LUI / FL 33558				
2. Principal F	Place of Business	3. Mailing Address 1901 BREN	SON AD.			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & Stat	е	City & State LUTZ		4, FEI Number Applied For Not Applicable		
Zip	Country	^{Zi} 9 33558	Country PASCE O	5. Certificate of Status Desired		
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent		
DOWEN	CI ALIDE T		Name			
BOWEN, CLAUDE T 1900 LAND O'LAKES BLVD.			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
#113-200						
LUTZ FL			City	FL Zip Code		
	named entity submits this statement for tions of registered agent.	the purpose of changing its r	registered office or regis	ered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE .						
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE:	Registered Agent signature requi	red when reinstating) DATE		
After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$750. Repartment of			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE Name Street address City-St-Zip	P T BOWEN, CLAUDE T 1901 BRINSON ROAD - UNIT Q1 LUTZ FL 33558	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE Name Street address City-St-Zip	VS BOWEN, DEBBIE 1901 BRINSON ROAD - UNIT Q1 LUTZ FL 33558	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP	·		STREET ADDRESS CITY-ST-ZIP			
TITLE Name Street address City-St-Zip		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



813-909-4042

Affachment S0134989 P02000041881 Fun Leasing Inc.

July 29, 2003

Florida Department of Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Dear Sir/Madam:

Pursuant to our telephone contact on July 28th, 2003, I am sending this notification as per your instruction.

Our company just received notice of late payment of the uniform Business report (ubr). This is the first notice of any kind we have received. Our mail is sent to a private post office box. The owner of the mail company gave up her business, which was then taken over by other people. The new owners have finally gone through their "new business" transition at others expense. In lieu of this I have enclosed check for \$150.00 as directed by your office.

Thank you

Claude T. Bowen

President

Fun Leasing Inc.