


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000077826</b>	
1. Entity Name <b>EXECUTIVE AUTO LEASING OF SOUTH FLORIDA, INC.</b>	

Principal Place of Business <b>11296 NW 65TH MANOR PARKLAND, FL 33076</b>	Mailing Address <b>11296 NW 65TH MANOR PARKLAND, FL 33076</b>
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**DO NOT WRITE IN THIS SPACE**



01062006 No Chg-P CR2E034 (11/05)

4. FBI Number <b>16-1676793</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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8. Name and Address of Current Registered Agent  <b>SCHWARTZ, ANDREW W ESQ. 1701 WEST HILLSBORO BLVD. SUITE 308 DEERFIELD BEACH, FL 33442</b>
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HALLMAN, CRAIG 11296 NW 65TH MANOR PARKLAND, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HALLMAN, BARBARA 11296 NW 65TH MANOR PARKLAND, FL 33076
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**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

<b>SIGNATURE:</b> 	Date <b>1-17-06</b>	Daytime Phone # _____
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		