2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039471

Entity Name: TONY EQUIPMENT LEASING CORP.

FILED Feb 03, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
C/O ANTHONY ROGERS, M.E 900 NORTH OLIVE AVENUE WEST PALM BEACH, FL 334		900 NORTH OLIVE AVENU WEST PALM BEACH, FL 33	
Current Mailing Address:		New Mailing Address:	
C/O ANTHONY ROGERS, M.I 900 NORTH OLIVE AVENUE WEST PALM BEACH, FL 334		3618 LANTANA RD LAKE WORTH, FL 33462	US
FEI Number: 65-0460729 FEI	Number Applied For () FEI Num	ber Not Applicable () Ce	ertificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
ROGERS, ANTHONY G M.D. 900 NORTH OLIVE AVENUE WEST PALM BEACH, FL 334	101 US		
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
Election Campaign Financing Trus	et Fund Contribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: PRES () Delete Name: ROGERS, ANTHONY	G M.D.	Title: () Cha	ange () Addition

900 NORTH OLIVE AVENUE Address: City-St-Zip: WEST PALM BEACH, FL 33401 US City-St-Zip:

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: ANTHONY ROGERS **PRES** 02/03/2005