

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106120

Entity Name: A.T.E. LEASING CORPORATION

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

3008 NW 82 AVE
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

3008 NW 82 AVE
MIAMI, FL 33122

New Mailing Address:

FEI Number: 20-3261498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSILLO, FRANK C.P.A.
8600 NW 53 TERRACE #201
MIAMI, FL 33166 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SUAREZ, ROLANDO
Address: 119 PALOMA DR
City-St-Zip: CORAL GABLES, FL 33148

Title: D () Delete
Name: SUAREZ, PATRICIA
Address: 119 PALOMA DR
City-St-Zip: CORAL GABLES, FL 33148

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SUAREZ, ROLANDO
Address: 3008 N.W. 82 AVE
City-St-Zip: MIAMI, FL 33166

Title: D (X) Change () Addition
Name: SUAREZ, PATRICIA
Address: 3008 N.W. 82 AVE
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROLANDO SUAREZ

PRES

01/09/2007

Electronic Signature of Signing Officer or Director

_____ Date