


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
Feb 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # P30842 (9)</b>		
1. Corporation Name <b>LEASE-COM SALES &amp; SERVICES, INC.</b>		



Principal Place of Business <b>TWO UNIVERSITY PLAZA SUITE 111 HACKENSACK NJ 07601 US</b>	Mailing Address <b>TWO UNIVERSITY PLAZA SUITE 111 HACKENSACK NJ 07601-8202 US</b>
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3. Date Incorporated or Qualified <b>08/28/1990</b>		3a. Date of Last Report <b>05/01/1996</b>	
2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country	
4. FEI Number <b>11-2882364</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>THE PRENTICE HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301</b>		10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		Signature typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	NAME	TITLE	NAME				
CD	MCCANLESS, GEORGE R.	1.1 TITLE	1.2 NAME				
257 EDGEWOOD RD		1.3 STREET ADDRESS	1.4 CITY-ST-ZIP				
FRANKLIN LAKES NJ		2.1 TITLE	2.2 NAME				
PD	THOMPSON, BRUCE H.	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP				
	35 BRANDYWINE ROAD	3.1 TITLE	3.2 NAME				
	HOKOKUS NJ	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP				
	SD	4.1 TITLE	4.2 NAME				
	CURRY, E. WAYNE	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP				
	317 PAUL COURT	5.1 TITLE	5.2 NAME				
	WYCKOFF NJ	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP				
		6.1 TITLE	6.2 NAME				
		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP				

14. I do 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 annual report or supplemental annual 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 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE:		E. Wayne Curry	2/20/97	(201) 489-5650
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone	

CR2E034 (9/96)