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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000010055 (0)

FLYCO LEASING CORPORATION Principal Place of Business Mailing Address 2211 LEE ROAD 2211 LEE ROAD SUITE 104 SUITE 104 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32789 WINTER PARK FL 32789 3. Date Incorporated or Qualified 02/09/1993 2. Principal Place of Business 2a, Mailing Address Applied For 59-3163630 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name ALPER, JONATHAN 274 KIPLING COURT Street Address (P.O. Box Number is Not Acceptable) HEATHROW FL 32746 84 City Zio Code 85 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 ruine of registered agent and title if applicable Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE Change Addition 1.1 TITLE TITLE WEISS, MITCHELL NAME 1.2 NAME 2211 LEE ROAD SUITE 104 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 32789 CITY-ST-ZIP 1.4 CITY - ST - 21P DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS City-St-2iP 2 4 CITY-ST-ZIP Addition DELETE 3 1 TITLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS

14. 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 annual report of supplication 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 circular core of the circular

SIGNATURE

FILED

May 04 1998 8:00am

Secretary of State

CR2E034 (10/97