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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000019403 (3)

PATTERSON LEASING COMPANY, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			E HABISABL IIA IDIZA IIINI ERINI ARINI			
% MICHAEL JOYCE 801 SE 17TH ST. STE 203 FORT LAUDERDALE FL 33316		% MICHAEL JOYCE 901 S.E. 17TH ST., STE, 203 FORT LAUDERDALE FL 33316				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 03/15/1993			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Т	Applied	For
21		26	26			65-0394086		Not App	olicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		.75 Additi	
22		27				G. Certificate of States Desired	F	ee Require	d
City & State		City & State				6. Election Campaign Financing	\$5.00 May Be		
23		28				Trust Fund Contribution		dded to Fe	
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the o			
24	[25]	29	30			Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes	LJ No	
10.	9, Name and Address of Curre	eni Hegistered Agent		B1 N	ame	10. Name and Address of New Registere	u Ageni		
•	HNSON, HENRY W			" "	arrie				
)1 University Dr. #301 Pral springs FL 33071		Ī	62 S	reet Addr	ress (P.O. Box Number is Not Acceptable)			
	THE OF MILEOUT E GOOT		Ì	83					
			ŀ	64 C	ity	F	85	Zip Code	,
44.0	Telestrone and the	No. 3 602 treat their con-	444 414 414			poration submits this statement for the purpose	_	aina ita ran	intered
office or ri	egistered agent, or both, in the Stal in familiar with, and accept the obli	te of Florida. Such change was	: authorized	J by the	corporat	tion's board of directors. I hereby accept the ap	opointme	ant as regis	stered
SIGNATURE						red when rainstation) DATE			
	Signature, typed or protect name of registered a	gest and tille it ingressable (NC ND DIRLCTORS	13.	Adeu, er	gnature requir	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTORS IN	12
12.	PSD	DEFFIE	1111	1.6	·····	ADDITIONS/CHANGES TO OTTICENS A		-	Addition
NAME -	PATTERSON, TIM	L. Delline	1.2 NA						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	901 SE 17TH ST, STE 203			MIC REET ADD	DCCC				
1	FORT LAUDERDALE FL			14-51- <i>2</i> 1					
CITY-S1-ZIP TITLE	D	DELETE	2111		r		Псі	nange []	Addition
NAME	JOYCE, MICHAEL		2 2 NA						
STREET ADDRESS	901 SE 17 ST STE 203			RELT ADD	Dr CC				
CITY-ST-ZIP	FORT LAUDERDALE FL			TY-ST-Z					
TITLE	(OIII DIOOLIOIRE I E	DELETE	31711				□ CI	nange	Addition
NAME		_	3 2 NA				_		
STREET ADDRESS				REET ADO	RESS				
CITY-ST-ZIP				1Y - S1 - Z					
TITLE		DELETE	4.1 7(1		"		C	nange 🔲	Addition
NAME		.—	4 2 NA						
STREET ADORESS				REET ADO	RESS				
CITY-ST-ZIP				Y - ST - <i>Z</i> 1					
TITLE		DELETE	5 1 T(T	· · · · · · · · · · · · · · · · · · ·			CI	nange 🔲	Addition
NAME			5 2 NA	ME					
STREET ADDRESS			5351	REET ADD	RESS				
CITY-ST-ZIP				IY-ST-ZI					
TITLE		DELETE	6 1 TIT				Ci	nange	Addition
NAME			6 2 NA	ME					
STREET ADDRESS			6 3 ST	REET ADD	RESS				
CITY-ST-ZIP				IY-ST- <i>Z</i> (
	certify that the information supplied	with this filing does not qualify				Section 119.07(3)(i), Florida Statutes. I further	certify th	at the infor	mation

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 if changed, or or an attachment with an address