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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000023138 (9)

| OnEAII   | VE LEASING INC.                                |   |                  |  |   |  |
|--|--|---|------------------|--|---|--|
| Principal Place  | of Business                                    | Mailing Address                                       |                  |  | F 1885(180) ILD EDITO AFILL OBILL DOVIN BOILL DEVEN I   | 1 <b>600</b> (610) (100) 1410(101) (00)  |
| 1410 COMMERCE BLVD<br>SUITE T<br>SARASOTA FL 34243<br>US |  | POST OFFICE BOX 25395<br>SARASOTA FL 34277-2395<br>US |                  | DO NOT WRITE IN THI  3. Date Incorporated or Qualified | S SPACE   |  |
| ] "  |  |   |                  |  | 03/29/1993  |  |
| 2. Principal Pi  | ace of Business                                | 2a. Mailing Address                                   | •                |  | 4. FEI Number   | Applied For  |
| 21   |  | 26  |                  | 65-0410636   | Not Applicable  |  |
| Suite, Apt. #, etc.                                      |  | Suite, Apt. #, etc.                                   |                  | 5. Certificate of Status Desired                       | \$8.75 Additional<br>Fee Required   |  |
| City & State   |  | City & State  |                  | 6. Election Campaign Financing                         | <b>\$5.00</b> May Be  |  |
| 23   | Country  | 28 Zip  | Coun             | htru   | Trust Fund Contribution   | Added to Fees  |
| Zip  | 25   | 29  | 30               | iti y  | <ol> <li>This corporation owes or has paid the or<br/>Personal Property Tax due June 30.</li> </ol> | Yes No   |
| 24   | 9, Name and Address of Curr                    |   | 1301             |  | 10. Name and Address of New Registere   | <del></del>  |
| CE   | RVERA, VENANCIO                                |   | - 1              | 81 Name  |   |  |
| 2524 SUNNYSIDE ST  |  |   | <del> </del>     | 82 Street Addi   | ress (P.O. Box Number is Not Acceptable)  | ~ <del></del>  |
| SARASOTA FL 34239  |  |   | L                |  |   |  |
| ]  |  |   | [                | B3   |   |  |
|  |  |   | Ī                | 84 City  | F   | ■ 85 Zip Code  |
| dd Dwygotd   | - the provisions of Continue CO7.0             | EO2 and CO7 1509 Florida Stat                         | tudos tho ob     | ove named core   | oration submits this statement for the purpose  |  |
| l office or re   | naistered eagent or both, in the Sta           | ata of Florida. Such changa wa                        | ie authorizad    | hy the corporal  | tion's board of directors. I hereby accept the ap   | ppointment as registered   |
| agent. Lar   | m familiar with, and accept the ob             | ligations of, Section 607.0505,                       | Florida Statu    | ites.  |   |  |
| SIGNATURE .  | Signalure, lyped or printed name of registered | accord and title if applicable (N                     | IOTE: Registered | Agent signature requi                                  | red when reinstating) DATE  |  |
| 12.  |  | AND DIRECTORS   | 13.              |  | ADDITIONS/CHANGES TO OFFICERS A   |  |
| TITLE  | P  | DELETE  | 1.1 TITE         | E  |   | ☐ Change ☐ Addition  |
| NAME   | CERVERA, VENANCIO                              |   | 1.2 NAM          | ME   |   |  |
| STREET ADDRESS   | 2524 SUNNYSIDE ST                              |   | 1.3 STR          | REET ADDRESS   |   |  |
| CITY-ST-ZIP  | SARASOTA FL                                    |   | 1.4 CIT          | Y-ST-ZIP   |   |  |
| TITLE  |  | ☐ DELETE  | 2.1 TITL         | .E   |   | Change Addition  |
| NAME   | 2  |   | 2.2 NAM          | ME   |   |  |
| STREET ADDRESS   |  |   | 2.3 STR          | REET ADDRESS   | ••  |  |
| CITY-ST-ZIP  |  |   | 2. 4 CIT         | Y-ST-ZIP   |   |  |
| TITLE  |  | ☐ DELETÉ  | 3.1 TITL         | LE   |   | Change Addition  |
| NAME   |  |   | 3.2 NAM          | ME   |   |  |
| STREET ADDRESS   |  |   | 3.3 STR          | REET ADDRESS   |   |  |
| CITY-ST-ZIP  |  | - I or ore  |                  | Y-SI-ZIP   |   | The state of the s |
| TITLE  |  | ☐ DELETE  | 4.1 TITL         |  |   | Change Addition  |
| NAME   |  |   | . 4.2 NA         | 1  |   |  |
| STREET ADDRESS   |  |   |                  | REET ADDRESS   |   |  |
| CITY-ST-ZIP  |  | DELETE  |                  | Y - ST - ZIP   |   | ☐ Change ☐ Addition  |
| TITLE  |  | □ DELETE  | 5.1 TITL         |  |   | ☐ change ☐ Addition  |
| NAME   |  |   | 5.2 NAN          |  |   |  |
| STREET ADDRESS   |  |   |                  | REET ADDRESS   |   |  |
| CITY-ST-ZIP  |  | Distrete  |                  | Y-ST-ZIP   |   | Change Addition  |
| TITLE  |  | ☐ DELETE  | 6.1 TITL         |  |   | Change Addition  |
| NAME   |  |   | 6.2 NAM          | 1  |   |  |
| STREET ADDRESS   |  |   | 6.3 STR          | REET ADDRESS   |   |  |

14. 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 if changed, or on an attackment with an address.

6.4 CITY - ST - ZIP

1.10-08

**FILED** 

Jan 30 1998 8:00am

Secretary of State