·	PLEASE RE	AD ALL INS		OMPLETING THIS FORM.	1 Ir
1 de	PLICATION FOR ISTATEMEN	FLORIE	Kan derig a larris Secretar of Stat	FILE	5 log
DOCUMENT # P9300024065				00 OCT 23 PH 12: 53	
1. Corporation Name				SECRETARY OF STATE TALLAHASSEE. FLORIDA	
H-QUAD LEASING CORP.				TALLAHASSEC. 1	COMPA
Principal P	Place of Business	Mailing Add			
2510 PHILLIPS HIGHWAY P.O. BOX JACKSONVILLE FL 32207 RUTHERFU US US			515 RD NJ 07070		
		line through incorrect i	information and enter correction below.		
2. New Principal Office Address, if Applicable 3. New Ma C/O I/U Suite, Apt. #, etc. Suite, Apt.			Ing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida 03	/30/ 1993
City & State			37 1705 V	5. FEI Number	Applied For Not Applicable
Zip Country Zip OMATA Country Country 6. CERTIFICATE OF STATUS DESIRED					
7. Names		ar and/or Director (Fl	orida nonprofit corporations must list at lea		
Title(s) 1	- Name of Offic and/or Direct		Street Address of Each Officer and/or Director 3	r City / Stat	te / Zip
Р	HANILEY, WILLIAM K		7 SHEPARD ROAD	WARWICK NY 10090	
Ŧ	-HANEEY, KEVIN-		<u>-65-WAEHINGTON-AVE:</u>	MA#WOODENJ-07687	
ST	ST HANLEY, DONALD		HETERRASEAVE.	PLACE D. THE PER	D.N. 070-
			Apt 203A DODOO3465470		170
				-11/16/000	1009007 ****150.00
			<u> </u>		LS
		ument Resistand An		9. Name and Address of New Registered A	aont and
	8Name and Address of C	urrent Kegisteren Ay	Name	ian K. NANLO	U P
HANLEY, ROVE P 2133 SEMINOLE RD					31U.D
ATLA	NTIC BCH FL 32233		Suite, Apt. #, Etc	V	
10 L boin	a appointed the registered agent of	the above named corr			33606
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Signature of Control Contron Control Control Control Control Control C					
Registered		REGISTERED A	GENT MUST SIGN	Date <u></u>	
this rei owed b	instatement application, the reason t by the corporation have been paid a	for dissolution has bee ind the names of indivi	n eliminated, the corporate name satisfies	provided for in chapter 607 or 617, F.S. I further of the requirements of section 607.0401 or 617.040 an exemption under section 119.07(3)(i), F.S. The r oath.	01, F.S., that all fees
SIGNA		OR PRINTED NAME OF		16/16/03 20/ Date / 03 20/	<u>-507-5</u> 664 time Phone #
}					

H-QUAD LEASING CORP. P.O. BOX 1515 RUTHERFORD, NJ 07070 (201) 507-5664

October 17, 2000

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

Re: H-Quad Leasing Corp. Document No. P93000024065

Dear Sir or Madam:

In reference to the above corporation I am writing this letter to request that you consider reinstatement and waive the \$600.00 reinstatement fee.

I am an officer of the corporation and general imanager and responsible for all of the corporate records. I travel between Florida and New Jersey on a regular basis as I handle both offices. Recently it came to my attiention that the corporation was administratively dissolved, due to failure to file the 20000 annual report. I apologize for the error in this form not being filed timely, but my Mother who has been responsible for the handling of all of the corporate records as the registered agent for the corporation, was diagnosed with terminal cancer early this year and we moved her back to New Jersey so she could be close to her family for her final days. Unfortunately, no one ever brought any forms or information to my attention concerning the filing of the annual report. I do not know if the forms were received, or received and misplaced because no one knew what to do with them.

I am enclosing a check in the amount of \$150.00 to cover the annual report fee, and respectfully request that you reinstate the corporation and waive the reinstatement fee.

I enclose herewith a self addressed stamped envelope for your courtesy in responding.

Very truly yours,

WILLIAM K. HANLEY Officer and General Manager Of H-Quad Leasing Corp.