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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000011004 (6)

1. Corporation Name

TRIPLE C LEASING, INC.



Principal Place of Business

Mailing Address

1919 S FEDERAL HWY
BOYNTON BEACH FL 33435
US

1919 FEDERAL HWY
BOYNTON BEACH FL 33435
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1994

4. FEI Number

65-0463203

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MENKHAUS, DAVID J
4800 N. FEDERAL HWY
SUITE 210-A
BOCA RATON FL 33431

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 TD
NAME LOPEZ-MOSCOSO, ENRIQUE
STREET ADDRESS 1300 PARK OF COMMERCE BLVD., #101
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME KHAN, ZAKIR
STREET ADDRESS 2475 41ST ST
CITY-ST-ZIP BOCA RATON FL ☐ DELETE

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD
NAME LOPEZ, NELSON F.H.
STREET ADDRESS 4855 HUNTERS WAY
CITY-ST-ZIP BOCA RATON FL ☐ DELETE

31 TITLE ☒ Change ☐ Addition
32 NAME
33 STREET ADDRESS 2609 Woolbright Road, Suite 5
34 CITY-ST-ZIP Boynton Beach, FL 33436 ☐ Change ☐ Addition

TITLE SD
NAME WEATHERFORD, GREGORY S.
STREET ADDRESS 2609 WOOLBRIGHT RD., #1
CITY-ST-ZIP BOYNTON BEACH FL ☐ DELETE

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME SCHERER, CHARLES
STREET ADDRESS 6825 SKYLINE DRIVE
CITY-ST-ZIP DELRAY BEACH FL ☒ DELETE

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BYRNES, JAMES
STREET ADDRESS 245 S COUNTRY CLUB BLVD
CITY-ST-ZIP BOCA RATON FL ☒ DELETE

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

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 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 attachment with an address.

F. H. Nelson Lopez

President

(561) 369-8400

CR2E034 (10/97)