

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED  
Jan 29 1997 8:00 am  
Secretary of State

DOCUMENT # P94000061326 (2)

1. Corporation Name  
ARAWAK LEASING CORP.



Principal Place of Business: 1020 S.W. 62ND STREET FORT LAUDERDALE FL 33309  
Mailing Address: 1020 S.W. 62ND STREET FORT LAUDERDALE FL 33309-1952

3. Date Incorporated or Qualified: 08/16/1994  
3a. Date of Last Report: 03/06/1996

21	2. Principal Place of Business 1575 W. COMMERCIAL BLVD. Suite, Apt. #, etc. Box K-2	22	2a. Mailing Address 1575 W. COMMERCIAL BLVD. Suite, Apt. #, etc. Box K-2	4.	FEI Number 65-0511803	Applied For	Not Applicable
23	City & State FT. LAUDERDALE, FL.	27	City & State FT. LAUDERDALE, FL.	5.	Certificate of Status Desired	\$8.75 Additional Fee Required	
24	Zip 33309	29	Zip 33309	6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
25	Country BROWARD	30	Country BROWARD	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes	No

9. Name and Address of Current Registered Agent ALBURY, C SCOTT 1020 NW 62ND ST 1575 W COMMERCIAL BLVD HANGER #7 BOX K-2 FT LAUDERDALE FL 33309				10. Name and Address of New Registered Agent			
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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBURY, C. SCOTT	1.2 NAME	
STREET ADDRESS	1020 N.W. 62ND STREET	1.3 STREET ADDRESS	1575 W. COMMERCIAL BLVD.
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	1.4 CITY-ST-ZIP	BOX K-2 FT. LAUDERDALE, FL. 33309
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 as an attachment with an address.

SIGNATURE: *[Signature]* \_\_\_\_\_ DATE: \_\_\_\_\_ DAYTIME PHONE # \_\_\_\_\_

CFR2E034 (9/96)