FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000083266 (4)

EJR LEASING, INC.

Principal	Place	of I	Busir	res

Mailing Address

8997 131 ST PLACE N

8997 131ST PLACE N



	LARGO FL 34643		LARGO FL 34643									
	US		US				3.	Date Incorporated or Qualified	3a. Date of	of Las	t Report	
								11/15/1994	05	/01/	1995	
2.	Principal Place of Business	2a.	Mailing Address				4.	FEI Number		T	Applied I	For
1		26	-					59-3278747			Not App	ilicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.				5.	Certificate of Status Desired			. 75 Addition	,
23	City & State	28	City & State				6.	Election Campaign Financing Trust Fund Contribution		, .	.00 May I	
4	Zip Country	29	Zip	Cour	ntry		В.	This corporation has liability for Florida Statutes	intangible tax	unde	rs 199.03	2,
	9, Name and Address	of Current Regis	stered Agent				10.	Name and Address of New R	egistered A	gent		
					81	Name						
PFEIFFER, CYNTHIA J 1485 PRESCOTT AVE S CLEARWATER FL 34616			82	Street Addres	ess (P.O. Box Number is Not Acceptable)							
			83									
					84	City			FL	85	Zip Code	
1	 Pursuant to the provisions of Section or registered agent, or both, in the S familiar with, and accept the obligation 	tate of Florida. Suci	h change was authorize	es, the aboved by the c	/e-n orpx	amed corporat oration's board	ion s of di	ubmits this statement for the pur rectors. I hereby accept the app	rpose of char ointment as r	iging egiste	its registere ered agent.	d office I am
S	IGNATURE	registered agent and title if	anni cable (NO)	IE: Registered	Agen	t signature required v	vhen re	instating)	DATE			
_		CIOEDO AND DIDE		12				ADDITIONS/CHANGES TO DEE	ICERS AND	DIREC	CTORS IN 1	12

SIGNATURE Signature, typied or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating!							
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	DPST DELETE	1. 1 TITLE	☐ Change ☐ Addition				
NAME	ROSENBERRY, EDGAR J	1.2 NAME					
STREET ADDRESS	8997 131ST PL N	1.3 STREET ADDRESS					
CITY-ST-ZIP	LARGO FL 34643	1.4 CITY-SI-ZIP					
TITLE	☐ DELETE	2 1 TITLE	☐ Change ☐ Addition				
NAME		22 NAME					
STREET ADDRESS		2.3 STREET ADDRESS					
CITY-ST-ZIP		2.4 CITY-ST-ZIP					
TITLE	☐ DELETE	3. 1 TITLE	Change Addition				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4 CITY - ST - ZIP					
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition				
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY - ST - ZIF					
TITLE	DELETE	5 1 TITLE	. Change Addition				
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS	·				
CITY-ST-ZIP		5.4 CITY - ST- ZIP					
TITLE	DELETE	6. 1 TITLE	☐ Change ☐ Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		64 CITY-ST-ZIP					

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 3 if chapted, or on an attachment with an address.

TED NAME OF SIGNING OFFICER OR DIRECTOR