

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 12, 2004 08:00 AM  
Secretary of State

DOCUMENT # P94000088951

1. Entity Name  
COMCO EQUIPMENT LEASING GROUP INC.



Principal Place of Business  
8763 PISA DRIVE  
#5211  
ORLANDO, FL 32810

Mailing Address  
8763 PISA DRIVE  
#5211  
ORLANDO, FL 32810



02092004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3284892	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RUBIN, CARL  
8763 PISA DRIVE, #5211  
ORLANDO, FL 32810

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000047929  
12/12/04-80060-011 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVP RUBIN, CARL I 8763 PISA DRIVE #5211 ORLANDO, FL 32810
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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARL I. RUBIN 2/10/04 4076297677

Date

Daytime Phone #