

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000007545

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** UNILEASING SERVICES, INC.

**Current Principal Place of Business:**

260 CRANDON BLVD  
SUITE 14  
KEY BISCAVNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

260 CRANDON BLVD  
SUITE 14  
KEY BISCAVNE, FL 33149

**New Mailing Address:**

**FEI Number:** 65-0559645      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOMEZ, CEASR  
260 CRANDON BLVD  
SUITE 14  
KEY BISCAVNE, FL 33149 US

**Name and Address of New Registered Agent:**

GOMEZ, CESAR  
260 CRANDON BLVD  
SUITE 14  
KEY BISCAVNE, FL 33149 US

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.

SIGNATURE: CESAR GOMEZ

04/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WICKE, HEINRICH  
Address: 260 CRANDON BLVD, STE. 14  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: SD  
Name: LCAVEX, CARMEN  
Address: 260 CRANDON BLVD, STE. 14  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: TD  
Name: LCAVEX, CARMEN  
Address: 260 CRANDON BLVD, STE. 14  
City-St-Zip: KEY BISCAVNE, FL 33149

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: HEINRICH WICKE

P

04/21/2011

Electronic Signature of Signing Officer or Director

Date