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

 PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 09 1997 8:00am

Secretary of State

012. 0110. Oils

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000022015 (8)

U.S. LEASING COMPANY

Principal Plac	e of Business	Mailing Address							
1527 NORTH DALE MABRY SUITE 104 LUTZ FL 33549 US		1527 NORTH DALE MABRY SUITE 104 LUTZ FL 33549 US							
					 Date Incorporated or Qualified 03/17/1995 	ied 3a. Date of Last Report 02/20/1996			
	Place of Business	2a. Mailing Address				4. FEI Number		А	opplied For
21	# -12	[26]			59-3301560			lot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
City & Stat	le •	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28			Trust Fund Contribution			to Fees	
Zip 24	Country	Zφ	_ Cou ∃	ntry		8. This corporation has liability for in	` ~	_	s 199 032,
24	9. Name and Address of Current	Peoletered Agent	0]			Florida Statules 10. Name and Address of New Reg		∐ No	
						TO. Maine and Address of New Neg	istered A	.yent	
* MROCZKOWSKI, MARK L 1630 DAIQUIRI LANE					Name				
	Z FŁ 33549		82 Street Add			ress (P.O. Box Number is Not Acceptabl	e)		
1012	L I L 03048			83					
		•							
•			•	В4	City		FL	85 Zip	Code
11. Pursuant to the provisions of Soctions 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Signature, typed or printed name of registered agon			l Age	et signature requ	red when reinstating)	DATE		
12.	OFFICERS AND	DELETE	13.			ADDITIONS/CHANGES TO OFFICE			
NAME	MROCZKOWSKI, MARK	☐ DELETE	1.1 TII				l	Change	Addition
STREET ADDRESS	1630 DAIQUIR LANE		1.2 NA	-	4DDDC00				
CITY-ST-ZIP	LUTZ FL		I		ADDRESS				
TITLE	001011	DELETE	1.4 C() 2.1 1()		1 - 2111			Change	Addition
NAME			2.2 NA				•	0.2	
STREET ADDRESS					ADDRESS				1
CITY-ST-ZIP			2.4 CI						
TITLE	☐ DELETE			LE				Change	Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 \$1	REET	ADDRESS				
CITY-ST-ZIP			3.4. CI	TY-S	1 - ZIP				
TITLE		☐ DELETE	4.1 TIT	lΕ				☐ Change	☐ Addition
NAME			4. 2 N/	AME					
STREET ADDRESS			4 3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 Cit		- 7IP				
TITLE		[] DETEAE	5.1 TIT				Ĺ	Change	☐ Addilion
NAME			5.2 NA						ł
STREET ADDRESS					ADDRESS				1
CITY-ST-ZIP TITLE		DETELE	5.4 CH		-7IP			05	1.000000
NAME		CT OFFEIG	6.1 TiT				·	Change	Addition
STREET ADDRESS			6.2 NA		ADDRESS				
CITY-ST-ZIP			6.4 CIT						
14. I do heret	by certify that the information supplied	with this filing does not qualify f	or the	exer	notion stated	I 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 eath; 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 12 changed, or on an attachment with an address.									