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CORPORATION ANNUAL REPORT



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

ANNOAL HELOTT
1996

MPUL	EASING, INC.				1 10011001 110 16101 01111 00111 00111 00111		a asina maa n mana a nna
Principal Place	of Rusiness	Mailing Address					
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4 WEST 20T NEW YORK		4 WEST 20TH STREE NEW YORK NY 1001	4 WEST 20TH STREET NEW YORK NY 10011				
		•			3. Date Incorporated or Qualified	3a. Date o	of Last Report
					10/05/1995		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	. L	Applied Fo
21		26			13-3855461		Not Applio
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	[]	\$8.75 Addition Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be
23	•	28			Trust Fund Contribution	[]	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for	intangible tax	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
24	25	29	30			c / [] a	
	9. Name and Address of 0	Current Registered Agent			10. Name and Address of New I	Registered A	gent
			81	Nan e			
	ENTICE-HALL CORPORATI	ION SYSTEM, INC.	82	Street Addre	ess (P.O. Box Number is Not Acceptat	ble)	
	AYS STREET		83				
SUITE 1							
IALLAN	ASSEE FL 32301		84	City		FL	85 Zip Code
11. Pursuant t	to the provisions of Sections 60	7.0502 and 607.1508, Florida Statu	tes, the above na	amed corpora	abon submits this statement for the pu	irpose of chan	ging its registered
or register familiar with SIGNATURF	ed agent, or both in the State of	of Florida. Such change was authori f, Section 607.0505, Florida Statute	zed by the corpo	oration's libare	d of directors. Thereby accept the app	irpose of chan nointment as re	ging its registered egistered agent. I a
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oath; that I am an officer or director of the corporation on 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 10 in Block 12 or Block 10 in an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

Day Day Description of 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 10 in an attachment with an address.

SIGNATURE:

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