SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000083245 (7)

LYNN'S LEASING GROUP, INC.

FILED Jul 13 1998 8:00am Secretary of State

Principal Plac	e of Bus iness	Mailing Address		• • • • • • • • • • • • • • • • • • • •		l ibbligher fin Lorde blige fille fille âneir di	inn 84101 10104 11110 11814 94861 9161 1001	
9800 RECYCLE CENTER ROAD 9800 RECYCLE CENTER ROAD ORLANDO FL 32824 ORLANDO FL 32824			AD					
STEELING TE VEGET						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	•	
ļ								
2. Principal Place of Business 2a. Mailing Address 25 USANCY HAYKS RD 26 9530 SIDNKY K				MIKE PD			Applied For	
						<u>59-3340965</u>		
Sulte, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired	\$8./5 Additional Fee Required	
City & State 23 City & State 28 ORLAND, FC					1	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip				Country		8. This corporation owes or has paid the current year Intangible		
24	→ 25	29 32894	30		Personal Property Tax due June 30. Yes No			
	9. Name and Address of C	urrent Registered Agent				10. Name and Address of New Regi	stered Agent	
ALTI	83 84 City FL 85 Zip Code ant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered 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							
ORLANDO FL 32824				2 Street	Address	Address (P.O. Box Number is Not Acceptable)		
OKL	ANDU FL 32824		8		<i>50</i> 3	STUNCY MAYES ED		
				4 014			Tool 7's Code	
			18	City			FL S Zip Code	
office or	registered agent, or both, in the	7.0502 and 607.1508, Florida Statutes, State of Florida. Such change was au obligations of, section 607.0505, Flori	thorized t	y the corp	corporation's	on submits this statement for the purpos board of directors. I hereby accept the	se of changing its registered e appointment as registered	
SIGNATURE	•		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1995 4. FEI Number 59-3340065 St. Certificate of Status Desired 59-340065 St. Certificate of Status Desired 59-340061 St. Certificate of St. Certif					
SIGNATURE	Signature, typed or printed name of register	ed agent and title II applicable. (NOTI	E: Registered	Agent signatu	ure required	when reinstating)	DATE	
12.		S AND DIRECTORS				ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	PTD	DELETE	1.1 TITLE		1		Change Addition	
NAME	ALTMAN, LYNN M		1.2 NAME		10	TO SIDNEY HOUR	RD.	
STREET ADDRESS	9800 RECYCLE CENTER I	road'	1.3 STRE	ET ADDRESS	95	30 STUNEY THE		
CITY-ST-ZIP	ORLANDO FL 32824		1,4 CITY-	ST-ZIP				
TITLE							Change Addition	
NAME	MADISON, PETER D		2.2 NAME	2.2 NAME		. CONSCIUNIUM PD		
STREET ADDRESS	PORESS 9000 RECYCLE CENTER ROAD		2.3 STREET ADDRESS		453	O STUNCY MAYES	:	
CITY-ST-ZIP	ORLANDO FL 32824						<u>:</u>	
TITLE		DELETE	3.1 TITLE				Change Addition	
NAME			3.2 NAME					
STREET ADDRESS	RESS		3.3 STREET ADDRESS		1			
CITY-ST-ZIP			3.4 CITY-	ST-ZIP	<u> </u>			
TITLE		DELETE	4.1 TITLE				Change Addition	
NAME			4.2 NAME				;	
STREET ADDRESS			4.3 STRE	TADDRESS			İ	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		DELETE	5.1 TITLE				Change Addition	
NAME			5.2 NAME	2 NAME				
STREET ADDRESS			5.3 STREE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		DELETE					Change Addition	
NAME			6.2 NAME			20000258	38162 Wa	
STREET ADDRESS			6.3 STREI	TADDRESS		-07/14/98010	150002 // 1	
CITY-ST-ZIP			8.4 CITY-	ST-ZIP	1	** <u>*150.80</u>		

14. 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 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 13 if changed, or on an attachment with an address.

SIGNATURE SOM NO DELLA

7/4/98

407 859-5990

CR2E034 (5/98)

Agnn's deasing Houp 2 9530 Sidney Hays Road Oclands, Fi 32824 July 6, 1998

RE: 59-3340965

We mailed our annual report to you on April 21, 1998, with our future new address. Evidently you returned it for correction but we never received it because we hadr't moved yet.

Now I am sending you another renewal, a replacement check and copies of what & originally mailed to you.

Please advise me if I need to send anything the.

Sincerely Sign M. allman