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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000092986 (5)

WONDER LEASING, INC.

## **FILED** Mar 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						# 1000(1000) 1100 1910 P OFFILE 80(1) #01(1) #01	ii baik ibii ii		
1048 OLEANDER ST 1048 OLEANDER ST LAKELAND FL 33801 LAKELAND FL 33801						DO NOT WRITE	IN THIS SPA	ACE	
						3. Date Incorporated or Qualified			<del>"""</del>
						12/05/1995			
<b>—</b>	lace of Business	2a. Mailing A	ddress			4. FEI Number		Ap	plied For
21	11	26				59-3349915			t Applicable
22 27			Suite, Apt. #, etc.			5. Certificate of Status Desired	_ :	\$8.75 A	Additional equired
City & Stat	·	City & Sta				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country Z <sub>(p</sub>			Country		8. This corporation owes or has pa	id the curren	t year Int	angible
24	25	[29]	30			Personal Property Tax due June 30. 🔀 Yes 🔲 No			
	g. Name and Address of	Current Registered Age	nt		1-2	10. Name and Address of New Re	glatered Age	ent	
	lker, stephen d			81	Name				
1048 OLEANDER ST LAKELAND FL 33801				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
				83		T			
				84	1 1			35 Zip (	4
11. Pursuant to the provisions of Sections 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
	Elignature, typied or printed name of regi-		(NOTE Regis	ered Ag	ent signature req	uirad when reinstating)	DATE		
12.		RS AND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFICE			
TITLE	D WALKED OFFICER D	L		1 TITLE				Change	Addition (
NAME	WALKER, STEPHEN D			2 NAME					[3
STREET ADDRESS				1.3 STREET ADDRESS					Į į
CITY-ST-ZIP TITLE	LAKELAND FL 33813 D			4 CITY-5	ST-ZIP				
NAME			I -	1 TITLE			Ц	Change	Addition
	KNOLL, RONALD M 8225 STUART LANE		•	2 NAME					
STREET ADDRESS	LAKELAND FL 33809				ADDRESS		£ 1		
CITY-ST-ZIP TITLE	DAVERNID LE 00009	Г		4 CITY - 1 TITLE	SI-ZIP			Change	Addition
NAME				2 NAME			니	Pilalige	☐ Addition
STREET ADDRESS					ADDRESS				l
CITY-ST-ZIP									j
TITLE				1 CITY	31-ZIP			Change	Addition
NAME	•	•		2 NAME			ـــا	O. IDINGS	
STREET ADDRESS					ADDRESS				[
CITY-ST-ZIP				d CITY-S					
TITLE				1 TITLE	31-24			Change	Addition
NAME		<u> </u>		2 NAME			_		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4 CITY-S					
TITLE				TITLE	, <u>L</u> .II		П	Change	Addition
NAME		_	-	2 NAME			-		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			E.	1 CITY - S	ľ				i
	sertify that the information cur-	plied with this blue does a			Alam adada al li	Continue 140 OT/OV() Florida Clab to - 1		15 - 1 Ab -	

Indicated on this annual report or supplied with this hing 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 suppliemental 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 cognoration 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 grianting or on an attacty that my haddress.

2.25.98 941-6866163