2008 FOR PROFIT CORPORATION

FILED Anr 07. 2008 08:00 Al ate

ANNUAL REPORT				Apr 07, 2000 00.0		
DOCUMENT # P96000036505 1. Entity Name KART LEASING, INC.					Secretary of Sta	
103 MARINA	e of Business A WAY E, FL 33823	Mailing Address 103 MARINA WAY AUBURNDALE, FL 33823		1 1 1 1 	IN 1815 NIIR NAIN ENIN ENIN NOIN ENIN NIIN NIIN NIIN NENN NEN	
C	OO NOT WRIT	E IN THIS SP	ACE	03252008 No Chg-P CR2E034 (11/05) 4. FEI Number		
103 MARI	6. Name and Address of Curre N, KENNETH L NA WAY DALE, FL 33823	nt Registorod Agent		DO NOT WRITE IN THIS SPACE		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Submit Signature. Typed or printed name of registered agent and title of applicable (NOTE: Registered Agent signature required when rounstating) PILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 P. Election Campaign Financing Added to Fees						
		ID DIRECTORS		· <u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ARNDTSEN, KENNETH L 103 MARINA WAY AUBURNDALE, FL 33823	D DIRECTORS			U00000882781 04/16/08-80055-005 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO NOT WRITE IN THIS SPACE		
NAME STREET ADDRESS CITY-SI-ZIP TITLE			*,	,		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

STREET ADDRESS CITY-\$1-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR