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 #

1. Corporation Name

P96000047910 (0)

ALL EQUIPMENT LEASING AND MANAGEMENT, INC.

Principal Place of Business

Mailing Address

FILED Jan 21 1998 8:00am Secretary of State



1 NE 23RD AVE SUITE 1 POMPANO BEACH FL 33062		7 ONEIDA LANE SEARANCH LAKES FL 33308						
					DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified	SPACE		
					05/31/1996			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	A	opplied For	
21 28 5	E 23 M Ave	26			65-0723100		lot Applicable	
Suite, Apt.	#, etč. † Floor	Suite, Apt. #, etc.			5. Certificate of Status Desired	rtificate of Status Desired S8.75 Additional Fee Required		
City & State 23 Pompana Beach 28					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip			Country	<i>i</i>	8. This corporation owes or has paid the current year Intangible			
24 53062 25 Broward 29 30			30	Personal Property Tax due June 30. 🔲 Yes 🔲 No				
9. Name and Address of Current Registered Agent PELICHICK CANDACE I 81				,	10. Name and Address of New Registered Agent			
BELICHICK, CANDACE L				Name				
	NEIDA LANE		82	Street Add	ress (P.O. Box Number is Not Acceptable)			
SEA RANCH LAKES FL 33308			83					
			84	City		85 Zip	Code	
44 5	10-4				FL		ilo rogistorod	
office or re	egistered agent, or both, in the State of	f Florida. Such change was a	authorized b	v the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	ointment a	s registered	
agent. I ar	m familiar with, and accept the obligat	ions of, Section 607.05 05, Fk	orida Statute	S.				
SIGNATURE	Signature, typed or printed name of registered agent	and an in the land of the land	(. D		uired when reinstating) DATE			
12.	OFFICERS AND		13.	erit signa:ore requ	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	P	DELETE	1.1 TITLE			Change	Addition	
NAME	BELICHICK, CANDACE		1.2 NAME		,			
STREET ADDRESS	7 ONEIDA LANE			T ADDRESS				
CITY-ST-ZIP	SEA RANCH LAKES FL 33308		1.4 CITY-				-	
TITLE		☐ DELETE	2.1 TITLE			Change	Addition	
NAME			2.2 NAME				1	
STREET ADDRESS			2.3 STREE	ADDRESS			1	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			i	
TITLE		☐ DELETE	3 1 TITLE			Change	Addition	
NAME			3.2 NAME				-	
STREET ADDRESS			3.3 STREE	ADDRESS			ļ	
CITY-ST-ZIP			3 4. CITY-	ST - ZIP				
TITLE		☐ DELE te	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	ADDRESS				
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP				
TITLE	- -	☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS		·	5.3 STREET	ADDRESS			ł	
CITY-ST-ZIP			5.4 CiTY-5	ST-ZIP		TT .		
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME				į	
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-\$T-ZIP		<u>.</u>	6.4 CITY - 3	ST - ZIP				

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.

CR2E034 (10/97)