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Jan 14 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000065172 (4)

1. Corporation Name
E.Z. AUTO AND EQUIPMENT LEASING CORP.



Principal Place of Business
7747 CEDARHURST COURT
LAKE WORTH FL 33467

Mailing Address
7747 CEDARHURST COURT
LAKE WORTH FL 33467-7879

3. Date Incorporated or Qualified 08/02/1996	3a. Date of Last Report
4. FEI Number 11-2528906	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 7747 Cedar Hurst Ct Suite, Apt. #, etc.	26 7747 Cedar Hurst Ct Suite, Apt. #, etc.
22 City & State Lake Worth FL	27 City & State Lake Worth FL
24 Zip 33467	25 Country U.S.
29 Zip 33467	30 Country U.S.

8. Name and Address of Current Registered Agent

TANNENBAUM, MICHAEL D
2161 PALM BEACH LAKES BOULEVARD
SUITE 304
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

81 Name Kenneth Shavelson
82 Street Address (P.O. Box Number is Not Acceptable) 7747 Cedar Hurst Ct
83
84 City Lake Worth FL
85 Zip Code 33467

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Kenneth Shavelson* DATE: 1/6/97

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President Secretary & Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Kenneth Shavelson	
1.3 STREET ADDRESS	7747 Cedar Hurst Ct	
1.4 CITY - ST - ZIP	Lake Worth, FL 33467	
2.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Peter Marks	
2.3 STREET ADDRESS	7388 Mahogany Bend Ct	
2.4 CITY - ST - ZIP	Boon Raton, FL 33434	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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: *Kenneth Shavelson* DATE: 1/6/97 DAYTIME PHONE #: 561-988-8003

CR2E034 (9/96)