يرجمر السائك

changed, or on an attachment w

SIGNATURE:

2008 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 25, 2008 08:00 AN **Secretary of State DOCUMENT # P96000070968** COPY PRODUCTS LEASING, INC. Principal Place of Business Mailing Address 910 E CERVANTES STREET 910 E CERVANTES STREET PENSACOLA, FL 32501 PENSACOLA, FL 32501 02202008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3405519 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WALLACE, ROGER R DO NOT WRITE 910 E CERVANTES STREET PENSACOLA, FL 32501 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be -- U00000839367 FILE NOW!!! FEE IS \$150.00 П After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE WALLACE, ROGER R NAME STREET ADDRESS 910 E CERVANTES STREET CITY-ST-ZIP PENSACOLA, FL 32501 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE-IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP onlied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 size empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplement. of the corporation or the receiver

R. Roger Wallace 2/20/08

FILED