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

PROFIT CORPORATION ANNUAL REPORT **1999**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000001315

Corporation Name

Suite, Apt. #, etc.

IBT LEASING SERVICES, INC

		The state of the s	
Principal Place of Business	71 1	Mailing Address	
3000 NW BOCA RATON BLVD. BOCA RATON FL 33431		3000 NW BOCA RATON BLVD. BOCA RATON FL 33431	;
			•

26

Suite, Apt. #, etc.

FILED Jan 28, 1999 8:00am Secretary of State

01-28-1999 90063 040 ***150.00



Applied For

\$8.75 Additional

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

01/07/1997, 4. FEI Number 3

65-0723713

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City & State			••			6. Election Campaign Fina	ncing	\$5.00	May Be	
→ •	28			•		Trust Fund Contribution		Added		
23	Country		C	Country		8. This corporation owes t	he current vear Intar	ngible		
Zip 24		tion of the	29	30			Personal Property Tax.		Yes	□No
24	- 1 N	25	1,	[30]			10. Name and Address of	New Registered A	gent	
<u> 16 in 15 in 15 in 16 i</u>	9. Nam	e and Address of Current	registered Agent	•••	81	Name	10: 144770 4744 744	in the Paris	<u> </u>	
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					84	City		The FL	163 2.5	,
Service serve With the		Figure of Spotiage 607 0502	and 607 1509 Florida St	atutes the	above	-named corn	oration submits this statement	for the numose of c	hanging its	registered
office or re	e horotaine	ment or both in the State of	"Florida" Such change wa	as authoriz	ed by t	ne corporatio	on's board of directors. I hereb	y accept the appoint	ment as re	gistered
agent. I ar	m familiar	with, and accept the obligation	ons of, Section 607.0505,	Florida St	atutes.		<u>.</u>			1
SIGNATURE	, s, j						<u>.</u>	1:-0, 74.34.5	<u> </u>	
	Signature, typ	ed or printed name of registered agent a				signature required	d when reinstating)	DATE	DIDECT	DDC IN 42
12.	. !	OFFICERS AND		1:			ADDITIONS/CHANGES	TO OFFICERS AND		ORS IN 12 Addition
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4. 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 infinite report is required by Chapter 607, Florida Statutes; and that my name appears in the same legal effect 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 the same legal effect of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE /

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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KZE034 (11/98)