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 # P97000033965 (9)

FILED Feb 11 1998 8:00am Secretary of State

	ORATE LEASING SYSTEM		·····			
Principal Place of Business Mailing Address			MAY ONE OUTE	200		
11780 U.S. HIGHWAY ONE. SUITE 300 11780 U.S. HIGHWAY ONE. NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 3				300		
				DO NOT WRITE IN THIS SPACE		
<u> </u>					3, Date Incorporated or Qualified 04/14/1997	
2, Principal F	Place of Business	2a. Mailing Addre	ss		4, FEI Number 65-0743456	Applied For
21		26		65-0743456	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional	
City & Sta		City & State				Fee Required
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has pai	
24	25	29	30		Personal Property Tax due June	
	g. Name and Address of Curr			Del Marin	10. Name and Address of New Re	glatered Agent
FHS CORPORATE SERVICES, INC.			Ľ	Name		
ľ	1780 U.S. HIGHWAY ONE, SUIT ORTH PALM BEACH FL 33408	IE JUU		Street Addr	ess (P.O. Box Number is Not Acceptab	le)
, , , , ,	UNITE FALM DEADER IL 30400		1	33		
			<u> </u>	34 City		85 Zip Code
			`	34 City		FL 85 Zip Code
11. Pursuant office or	to the provisions of Sections 607.0 registered agent, or both, in the St	1502 and 607 1508, Florida ate of Florida, Such chang	a Statutes, the above was authorized	ove-named corp by the corporat	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
agent. La	am familiar with, and accept the ob	ligations of, Section 607.0	505, Florida Statu	tes.	,	
SIGNATURE	Signature, typed or profest name of registered	nacet and their acet cable	(NC)TL Registered	Agent signature require	ed when reinstating)	DATE
12.		AND DIRECTORS	13.	•	ADDITIONS/CHANGES TO OFFIC	
TITLE	D,P,S	☐ DEI	ETE 1.1 TITL	F		☐ Change ☐ Addition
NAME 4	layne Parsons 3015 N. Flagler D West Palm Beach, I	rive	1.2 NAM	fE .		
STREET ADDRESS	West Palm Beach, I	FL 33407	1	EET ADDRESS		
CITY-S1-ZIP TITLE		DEL		r-ST-Z#P		Change Addition
NAME	İ		2.2 NAN			E Paulion
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		_	2. 4 CIT	Y - ST - ZIP		
TITLE		DLI.	E.TE 3.1 TITL	E		Change Addition
NAME			32 NAM			
STREET ADDRESS	ļ			EET ADDRESS		-
CITY-ST-ZIP TITLE		DEL		Y-ST-ZIP		Change Addition
NAME		_ bit	4. 2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DEI	ETE 51 TITL	F		☐ Change ☐ Addition
NAME			52 NAM	IE j		
STREET ADDRESS			10	EET ADDRESS		
CITY-ST-ZIP		T NE		r-ST-ZIP		Charas Addition
TITLE		☐ DFL				Change Addition
NAME CTREET LODGECC			6.2 NAM			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP	<u></u>		64 CITY	/-ST-ZIP	Section 110 07/2)(i) Florido Statutos I	5 - th

Information with a supplied with this limit does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that fine information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustice 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 oddress

Jayne Parsons, President