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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000074610 (1)

FAMILY LEASING CORPORATION

FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 301 YAMATO ROAD, STE. 1200 301 YAMATO ROAD, STE, 1200 BOCA RATON FL 33431 BOCA RATON FL 33431 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/27/1997 2. Principal Place of Business 2a. Mailing Address El Numbe Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees aid the current year Intangible Zip Country Zip Country This corporation offices or has Personal Property Tax due Ju 24 ax due june 30. 25 29 30 Yes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 STILLMAN, L. VAN 301 YAMATO ROAD, STE. 1200 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 Zip Code 85 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 accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change STILLMAN, L. VAN NAME 12 NAME 301 YAMATO ROAD, STE. 1200 STREET ADDRESS 1.3 STREET ADDRESS BOCA RATON FL 33431 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 720STOE~T DELETE 2.1 TITLE Change Addition FRECTOR Debbie NAME 2.2 NAME 1200 301 you STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-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 corroration 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 changes, so on an attachment with an address.

SIGNATURE:

117/98