


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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000102588 (5) 1. Corporation Name LTI VEHICLE FINANCE CORP.			
Principal Place of Business C/O LEASING TECHNOLOGY, INC. 5713 CORPORATE WAY, SUITE 200 WEST PALM BEACH FL 33407		Mailing Address C/O LEASING TECHNOLOGY, INC. 5713 CORPORATE WAY, SUITE 200 WEST PALM BEACH FL 33407	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 12/05/1997			
4. FEI Number 65-0807473			
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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent BROWN, BENJAMIN P ESQ. 140 ROYAL PALM WAY SUITE 206 PALM BEACH FL 33480		10. Name and Address of New Registered Agent 81 Name Jack Furman 82 Street Address (P.O. Box Number is Not Acceptable) BANKRUPTCY 83 1750 E Sunrise BL 84 City Ft Lauderdale FL 85 Zip Code 33304	
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 <i>Jack A. Furman</i> 5/7/98 Signature: typed or printed name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE <input type="checkbox"/> DELETE NAME D GRAHAM, ANTHONY L STREET ADDRESS C/O LEASING TECHNOLOGY, INC. CITY-ST-ZIP WEST PALM BEACH FL 33407		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME WHORL, C. Ted STREET ADDRESS 5713 CORPORATE WAY #200 CITY-ST-ZIP W. Palm Beach FL		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME Lutz, Charles W. STREET ADDRESS 5713 Corporate Way #200 CITY-ST-ZIP W Palm Beach, FL		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME Proctor, Nancy STREET ADDRESS 5713 Corporate Way #200 CITY-ST-ZIP W Palm Beach, FL		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME Buzann Mauroner STREET ADDRESS 5713 Corporate Way #200 CITY-ST-ZIP W Palm Beach, FL		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME AVP WEISHEIT, DEBORAH STREET ADDRESS 5713 Corporate Way CITY-ST-ZIP W Palm Beach FL		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)

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 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.

11/16/98 561-478-1001