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 # P97000104925 (7)

1. Corporatio	n Name LEASING	CORP.		(,)						
Principal Place of Business Mailing Address										
4839 S.E. MARINER VILLAGE 4839 S.E. MARINER VIL STUART FL 34997 STUART FL 34997					.AGE			DO NOT WRITE IN THIS SPACE		
ł								3. Date incorporated or Qualified	_	
1								12/12/1997		
2. Principal P	lace of Bus	iness	2a. Mailing A	2a. Mailing Address				4. FEI Number Applied For		
21		_	26	26				65 - 0814487 Not Applicat	ole	
Suite, Apt.	#, etc.		Suite, Ap	Suite, Apt. #, etc.				6 Certificate of Status Desired 38.75 Additional		
22	27					Fee Required				
City & Stat	0		⊢ ′	City & State				6. Election Campaign Financing \$5.00 May Be		
Zip Country			28]	Zip Country				Trust Fund Contribution Added to Fees		
24	25		29	30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
271	g, Name and Address of Curren					T		10. Name and Address of New Registered Agent		
DF	RITA, THE	RESA		· - · · · · · · · · · · · · · · · · · ·	8	1	Name			
		ARINER VILLAGE			8	2	Street Aridu	ress (P.O. Box Number is Not Acceptable)		
STUART FL 34997										
j					8	3				
					8	4	City	■■ 85 Zip Code		
	 .							FL 18 2 P COUG		
11. Pursuant office or i	to the provi registered a	sions of Sections 607.0 gent, or both, in the Sta vith, and accept the ob	ale of Florida. Such c	-iorida Statuti :hanga was a	es, the abo authorized l	ve-i by t	named corp the corporati	coration submits this statement for the purpose of changing its register cion's board of directors. I hereby accept the appointment as registered	a i	
SIGNATURE	anti lantini an vi	viiii, arid accept tile ob	ingations or, section (007.0000, 110	Jilua Statot	05.				
	Signature, type	d or printed name of registered		(NO1)		gent	signature require	ed when reinstaling) DATE		
12.		OFFICERS A	AND DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Additional Additional Change Additional Chan		
TITLE NAME	DERITA, THERESA				1.1 TITLE 1.2 NAME			E change E Adoil	Uri	
STREET ADDRESS 4839 S.E. MARINER VILLAGE					1.3 STREET ADDRESS		nnaess			
CHY-ST-ZIP STUART FL 34997					1.4 CITY - ST - ZIP				i	
TITLE	<u> </u>	., , , , , , , , , , , , , , , , , , ,		DELETE	2.1 TITLE			☐ Change ☐ Additi	on	
NAME					2.2 NAME					
STREET ADDRESS					2.3 STRE	E1 AI	DDRESS			
City-St-ZiP					2. 4 CITY	- ST-	- ZIP			
TITLE		-		DELETE	3.1 TITLE			Change Additi	on	
NAME					3.2 NAM	Ē				
STREET ADDRESS					3.3 STRE	ET AL	DDRESS			
CITY+ST-ZIP			·	DELETE	3.4. CITY 4.1 TITLE		-ZIP	☐ Change ☐ Addill	<u></u> -	
TITLE			L.	ן טננבונ				Change (Notifie	ווט	
STREET ADDRESS					4. 2 NAM 4.3 STRE		DOULCE			
CITY-ST-ZIP					4.4 CITY				ľ	
TITLE	- 	· · · · · · · · · · · · · · · · · · ·		DELETE	5.1 TITLE		- LII	Change Addits	on.	
NAME			_		5.2 NAME		ĺ			
STREET ADDRESS					5.3 STRE		DDRESS			
CITY-ST-ZIP		_			5.4 CITY					
TITLE				DELETE	6.1 TITLE	_		☐ Change ☐ Additi	٥n	
NAME	1				6.2 NAME		1		ļ	
STREET ADDRESS					63 STRE	ET AC	DDRESS			
CITY-ST-ZIP					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 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.

FILED Apr 10 1998 8:00am Secretary of State

2-19-98 561-221-8488