

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90104 001 *2,381.25

DOCUMENT # P 980000 14413
1. Entity Name

PROGRESSIVE LEASING, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 11800 28TH ST. N. 3. Mailing Address 11800 28TH ST. N.

Suite, Apt. #, etc.

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DO NOT WRITE IN THIS SPACE

City & State St. Petersburg, FL City & State St. Petersburg, FL

4. FEI Number 59-3493237 Applied For ☐ Not Applicable ☒

Zip 33716 Country USA

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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Joseph Camillo

Street Address (P.O. Box Number is Not Acceptable)

11800 28TH ST. NO.

City St. Petersburg FL Zip Code 33716

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Joseph Camillo
Signature, typed or printed name of registered agent and title if applicable.

Joseph Camillo
(NOTE: Registered Agent signature required when reinstating)

4/22/02
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE President/Director
NAME Pamela Wilkinson
STREET ADDRESS 11800 28TH ST. N.
CITY-ST-ZIP St Petersburg, FL. 33716

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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Pamela Wilkinson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02 727-592-0146
Date Daytime Phone #

CR2E034B (12/01)