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

'PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 MAR 18 PM 1:34

DOCUMENT # P98000060832

1. Corporation Name
BOULEVARD EAST BLIMPIE LEASING CORP.

Principal Place of Business	Mailing Address
C/O UNITED CORPORATE SERVICES, INC. 801 NE 167TH ST. SUITE 300 NORTH MIAMI BEACH FL 33162	C/O UNITED CORPORATE SERVICES, INC. 801 NE 167TH ST. SUITE 300 NORTH MIAMI BEACH FL 33162

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/09/1998
4. FEI Number: 58-2413973 [ ] Applied For [ ] Not Applicable
5. Certificate of Status Desired ✓ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 1775 THE EXCHANGE
Suite, Apt. #, etc. 27 #600
City & State 28 ATLANTA GA
Zip 29 30339 Country 30 USA

9. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.
801 NE 167TH ST SUITE 300
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name: UNITED CORPORATE SERVICES, INC.
82 Street Address (P.O. Box Number is Not Acceptable): 9200 S. DADELAND BLVD.
83 STE 508
84 City: MIAMI FL 85 Zip Code: 33156

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 Michael A. Barr Pres- United Corporate Services, Inc 1/29/99

12. OFFICERS AND DIRECTORS

TITLE	P	[ ] DELETE
NAME	JOSEPH MORGAN	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	NEW YORK, NY 10003	
TITLE	V/D	[ ] DELETE
NAME	DAVID L. SIEGEL	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	NY, NY 10003	
TITLE	V/D/S	[ ] DELETE
NAME	CHARLES LEANESS	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	N.Y. NY 10003	
TITLE	T	[ ] DELETE
NAME	PATRICK POMPEO	
STREET ADDRESS	740 BROADWAY	
CITY-ST-ZIP	N.Y. N.Y 10003	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change	[ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	[ ] Change	[ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	[ ] Change	[ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	[ ] Change	[ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	[ ] Change	[ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	[ ] Change	[ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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****158.75 ****158.75

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, with all other like empowered.

SIGNATURE: V/D 2/1/99 (212) 673 5900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
DAVID L. SIEGEL

CR2E034 (11/98)