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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000096336

1. Corporation Name

| ECUACA | R LEASING & SALES, CO | RP. | | | | | | | |
|--|--|--------------|----------------------|----------|---------|---------|---------------------|--|----------|
| Principal Place | e of Business | Ma | iling Address | | | | • | - F 10051000 140 (800) 10113 00111 00111 00111 00111 10138 01368 15100 11(10 01)1 | 1 1001 |
| 2542 N.W. 38 CT. MIAMI FL 33142 2542 N.W. 38 CT. MIAMI FL 33142 | | | 2 N.W. 38 CT. | | | | | DO NOT WRITE IN THIS SPACE | |
| | | | | | | | | 3. Date Incorporated or Qualifed 11/16/1998 | |
| 2. Principal Pl | lace of Business | 2a. | Mailing Address | | | | | 4. FEI Number 65 - 088 9/5 - Not Applied F | cable |
| Suite, Apt. | #, etc. | 27 | | | | | | 5. Certificate of Status Desired See Required | |
| City & State | е | 28 | | | | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May 8 Added to Fees | |
| Zip | Country 25 | 29 | Zip | 30 | untry | | | 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No | |
| | 9. Name and Address of Curro | ent Regist | ered Agent | | 81 | NI | | 10. Name and Address of New Registered Agent | \dashv |
| | ENCIA, JENNY C | | | | 82 | Name | | ess (P.O. Box Number is Not Acceptable) | \dashv |
| 2542 N.W. 38 CT. Miami Fl 33142 | | | | | 83 | | <u>-</u> | . , | |
| | • | | | | 84 | City | | FL 85 Zip Code | - |
| | *** | | | | Ш | | | | |
| office or r | to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig | e of Florida | a. Such change was a | utnonzei | יעמים | tne cor | o corpo poration | oration submits this statement for the purpose of changing its registen's board of directors. I hereby accept the appointment as registere | d |
| SIGNATURE | Signature, typed or printed name of registered a | | | | | | a required | when reinstating) DATE | - |
| 12. | OFFICERS A | | | 13. | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN | 12 |
| TITLE | PD | | ☐ DELETE | 1.1 T | ITLE | | | | Addition |
| NAME | VALENCIA, JENNY C | | | 1.2 N | AME | | | | |
| STREET ADDRESS | 2542 N.W. 38 CT. | | | 1.3 S | TREET | ADDRES | s | | } |
| CITY-ST-ZIP | MIAMI FL 33142 | | | 1.4 0 | ITY-\$1 | T- ZIP | | | |
| TITLE | | | ☐ DELETE | 2.1 T | TLE | | | ☐ Change ☐ A | Addition |
| NAME | | | | 2.2 N | AME | | ļ | | 1 |
| ^STREET ADDRESS | | | , | 2.38 | TREET | radores | s | مرايا يوس الوالات المحايات المحايات المحاسب | ş. |
| CITY-ST-ZIP | • | | | 2.40 | CITY-S | T-ZIP | | | |
| TITLE | | | ☐ DELETE | 3.1 T | ITLE | | | ☐ Change ☐ / | Addition |
| NAME | | | | 3.2 N | AME | |] | | |
| STREET ADDRESS | | | | 3.3 S | TREET | FADORES | s | | Į |
| CITY-ST-ZIP | | | | 3.4. (| ZITY-S | T-ZIP | | | |
| TILE | | | ☐ DELETE | 4.1 T | ITLE | | | Change J | Addition |
| NAME | | | | 4.21 | NAME | | | | |
| STREET ADDRESS | | | | 4.3 S | TREET | FADORES | s | | ĺ |
| CITY-ST-ZIP | | | | 4.4 C | ITY-S | T-ZIP | | | |
| TITLE | | _ | ☐ DELETE | 5.1 T | | | | ☐ Change ☐ | Addition |
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| STREET ADDRESS | | | | | | TADORES | S | | ļ |
| CITY-ST-ZIP | | | | | TY-S | T- ZIP | | | |
| TITLE | | | ☐ DELETE | 6.1 T | | | | ☐ Change ☐ / | Addition |
| NAME | | | | 6.2 N | | | | | 1 |
| STREET ANDRESS | | | | 6.3 S | TREET | ADDRES | s | | į |

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

