SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 20 AM 8:21

DOCUMENT # **S25070** **(1)**

1. Corporation Name
SECURE LEASING, INC.

Principal Place of Business	Mailing Address
~~6815 SW 24 CT.~~ ~~MIAMI FL 33155~~ US	~~3520 SW 104 AVE~~ ~~MIAMI FL 33165~~ US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/04/1991	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0286306	☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 6800 S.W. 40TH ST	26 6800 S.W. 40TH ST
Suite, Apt. #, etc. 22 SUITE 327	Suite, Apt. #, etc. 27 SUITE 327
City & State 23 MIAMI, FLA	City & State 28 MIAMI FLA
Zip 24 33155 Country 25 U S	Zip 29 33155 Country 30 U.S.

9. Name and Address of Current Registered Agent

~~CHILDERS, CHARLES D.~~
~~8315 SW 24 CT~~
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name: SNEATH LEWIS
82 Street Address (P.O. Box Number is Not Acceptable): 6800 S.W. 40TH ST.
83: SUITE 327
84 City: MIAMI FL. FL 85 Zip Code: 33155

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: LEWIS SNEATH Lewis Sneath 6-15-95
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS		
TITLE	PD	11 TITLE	P&D	☒ Change ☐ Addition
NAME	LEWIS, SNEATH	12 NAME	LEWIS SNEATH	
STREET ADDRESS	~~3520 SW 104 AVE~~	13 STREET ADDRESS	6800 S.W. 40TH ST	
CITY ST ZIP	MIAMI FL	14 CITY ST ZIP	MIAMI, FLA. 33155	
TITLE	ST	21 TITLE	ST	☒ Change ☐ Addition
NAME	CLARA, SNEATH	22 NAME	CLARA SNEATH	
STREET ADDRESS	~~3520 SW 104 AVE~~	23 STREET ADDRESS	6800 S.W. 40TH ST	
CITY ST ZIP	MIAMI L	24 CITY ST ZIP	MIAMI, FLA. 33155	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: LEWIS SNEATH Lewis Sneath 6-15-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

0056673 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

DOCUMENT # **S26071** **(8)**

1. Corporation Name
TECHNOLOGY PLANNING INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
3324 COBB COURT PALM HARBOR FL 34684 US	3324 COBB COURT PALM HARBOR FL 34684 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/18/1991
3a. Date of Last Report: 06/09/1994

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 65-0239020	☐ Applied For ☐ Not Applicable
21 3324 Cobbs Ct	26 3224 Cobb Ct		
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired ☑	$8.75 Additional Fee Required
23 City & State: Palm Harbor Florida	28 City & State: Palm Harbor Fla.	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
24 Zip: 34684 25 Country: USA	29 Zip: 34684 30 Country: USA	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FILINGS INC. 3732 N.W. 16TH ST. FT. LAUDERDALE FL 33311	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 No Change 84 City FL 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	DOUGLAS, ROBERT J.	12 NAME	
STREET ADDRESS	3324 COBBS COURT	13 STREET ADDRESS	
CITY ST ZIP	PALM HARBOR FL	14 CITY ST ZIP	
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Robert J Douglas 6/13/95 813-789-0651
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0307188 CP