Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # \$49467**

1. Corporation Name

Principal Place of Business

WORLD TRADE LEASING, INC.

1120 HOLLAND	DR	1120 HOLLAND DR				
#16 BOCA RATON F	FI 33487	#16 BOCA RATON FL 33487		DO NOT WRITE IN	THIS SPACE	
US TRATORY	1 L 60107	US		3. Date Incorporated or Qualifed		
				04/29/1991		
	lace of Business	2a. Mailing Address		4. FEI Number		plied For
21 2827 5	RANYAN BLUD. CRNW	26 J827 34NYAN 3	BLUS CR NW	59-3069857		t Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	
22 '		27			Fee Re	•
City & State		City & State	<b>-</b> .	6. Election Campaign Financing	\$5.00	, ,
	RATON - FLORISA		<u>-LORISA</u>	Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye		
24 3343		29 <u> </u>	0 <u>USA</u>	Personal Property Tax.		□No
	9. Name and Address of Current I	Registered Agent	04 14	10. Name and Address of New Regis	tered Agent	
DADI	DOCA NEIL I		81 Name	BOSA NEIRE L.		
BARBOSA, NEIL L 2827 BANYAN BLVD CIRCLE N.W.			82 Street Add	idress (P.O. Box Number is Not Acceptable)		
			2827	BANYAN BLUD CR. NW		
BUC.	A RATON FL 33431		83	,		
			84 City	***************************************	85 Zip 0	
			Roca	RATON	<b>FL</b>   334	131
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the purpo ion's board of directors. I hereby accept the	ose of changing its	registered i
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligatio	r Flonga, Such change was autr ons of, Section 607.0505, Florid	a Statutes.	lors board of directors. Thereby accept the	appointment as to:	giotoroa
SIGNATURE						Į
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Agent signature requir		ATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE		
12.	P	DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO Change	RS IN 12
	P BARRETTO, EDGARD P	☐ DELETE		ADDITIONS/CHANGES TO OFFICE		
TITLE	P BARRETTO, EDGARD P 2827 BANYAN BLVD CIRCLE N.V	☐ DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE		
TITLE NAME	P BARRETTO, EDGARD P	☐ DELETE	1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICE	Change	☐ Addition
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6.3 STREET ADDRESS

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 any address, with all other like empowered.

SIGNATURE:

STREET ADORESS

CITY-ST-ZIP

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90014 016 \*\*\*150.00