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

PROFIT CORPORATION ANNUAL REPORT

1. Corporation Name

DOCUMENT # \$95570



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State DIVISION OF CORPORATIONS 1999

Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90016 023 ***150.00

INTERNA	ATIONAL EQUIPMENT LEAS	SING CORP.							
Principal Place	e of Business	Mailing Address				1 8011 BIBİL BIBIS BI	Ett Blått bl		
1608 NEW CHAPEL DR 1608 NEW CHAPEL DR									
ORLANDO FL 32837 ORLANDO FL 32837					DO NOT MOIT	E IN TUIC COA	CE.		
					DO NOT WRIT 3. Date Incorporated or Qualifed	E IN THIS SPA	CE		ì
					11/21/1991				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Apr	lied For	
					59-3140627		\longrightarrow	Applicable	١
25 26 Suite, Apt. #, etc. Suite, Apt. #, etc.							8.75 A		
22 ~ · · · · · · · · · · · · · · · · · ·					5. Certifcate of Status Desired		Fee Red	quired	
		City & State	City & State		6. Election Campaign Financing		55.00	May Be	
23		28		Trust Fund Contribution	`	Added to	Fees		
Zip Country		, Zip	, Zip Country		8. This corporation owes the curre		eاد		
24	25	29 30	0		Personal Property Tax.			No	ļ
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New R	agistered Ager	<u>1t</u>		ł
LUONG, KENNY 1608 NEW CHAPEL DR			81	Name		•		*	
			82	Street Add	ress (P.O. Box Number is Not Acceptai	ole)			
ORLANDO FL 32837			83						ł
ONL	ANDO FL 32837		83	5					
			84	1 City		FL 85	5 Zip C	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes					and in the statement for the		aging its	rogistored	1
office or n	to the provisions of Sections 607.05t egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	orized by	v the corporati	on's board of directors. I hereby accep	the appointme	nt as reg	jistered	
SIGNATURE		4)075.0			- d values as is stolened	DATE			}
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFF		RECTO	RS IN 12	
TILE	D OFFICERS A	DELETE	1.1 TITLE				Change	☐ Addition	
NAME	LUONG, KENNY								
STREET ADDRESS	1608 NEW CHAPEL DR		1.2 NAME	ET ADDRESS					
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-						
TITLE	[m]		2.1 TITLE				Change	☐ Addition	1
NAME	LUONG, HOANG	ANG 22							
STREET ADDRESS	5537 CENTURY 21 BLVD		2.3 STREET ADDRESS						
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-	ST-ZIP					ŀ
TITLE			3.1 TITLE				Change	☐ Addition	
NAME			3.2 NAME	:					ł
STREET ADDRESS			3.3 STREE	ET ADDRESS					
CITY-\$T-ZIP			3.4. CITY-	ST-ZIP				·· <u>-</u>	1
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition	
NAME			4. 2 NAME	.					
STREET ADDRESS			4.3 STREE	ET ADDRESS					ļ
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		<u>-</u>			-
TITLE			5.1 TITLE	1			Change	Addition	
NAME			5.2 NAME						1
STREET ADDRESS			1	ET ADDRESS					
CITY-ST-ZIP			5.4 CITY-				Ohana.	□ A JJJ;t;	ł
TITLE		☐ DELETE	6.1 TITLE			L	Change	☐ Addition	
NAME			6.2 NAME						l
STREET ADDRESS			6.3 STRE	ET ADDRESS					

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:

CITY-ST-ZIP