## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # V20794

1. Entity Name
BURT LEASING CORPORATION



FILED Jan 25, 2007 08:00 AM Secretary of State

Principal Place of Business

1601 SE CYPRESS PK LN JUPITER, FL 33478

Mailing Address

6461 GARDEN ROAD RIVIERA BEACH, FL 33404



01212007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0327715 Applied For Not Applicab

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHNEIDER, JOHN C. 440 ROYAL PALM WAY SUITE 203 PAI M BEACH FI 33480

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FALIVI BEACH, FL 33460			,			
8. The above the obligat	named entity submits this statement for the lions of registered agent.	ourpose of changing its registere	ed office or re	egistered agent, or bo	oth, in the State of Florida. I am far	miliar with, and acce
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registore	d Agent signature	required when reinstaling)	DATE	
FIL After Ma	Election Campaign Finar     Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees 1)1	U00000602367 /26/07-80086015 19	50.00	
10.	OFFICERS AND DIRECTORS					·
NAME STREET ADDRESS CITY-ST-ZIP	D BELL, STEVEN M. 6461 GARDEN ROAD RIVIERA BEACH, FL 33404					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						·

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 i changed, or on an attachment that an address, with all other like empowered.

NONATURE V STATION MI R

TIFLE
NAME
STREET ADDRESS
CITY-ST-ZIP