

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0003879 AV

**DOCUMENT # B97000000686**



**FILED**

**03 APR 29 AM 8:35**

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1. Entity Name  
**WORLD OMNI AUTO LEASING LP.**

Principal Place of Business <b>6150 OMNI PARK DR MOBILE AL 36609</b>	Mailing Address <b>111 NW 12TH AVE LEGAL DEPT JMFDF018 DEERFIELD BEACH FL 33442</b>
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2. Principal Place of Business		3. Mailing Address <b>ATTN: LEGAL DEPT. JMFDF018</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <b>100 JIM HOGAN BLD.</b>	
City & State		City & State <b>DEERFIELD BEACH FL</b>	
Zip	Country	Zip	Country
<b>33442</b>	<b>USA</b>	<b>33442</b>	<b>USA</b>

**DUE BY MAY 1, 2003**

4. FEI Number <b>65-0800014</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
City **FL** Zip Code \_\_\_\_\_

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$77,873,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **41,142,000**

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	<b>M98000001147</b>
NAME	<b>WORLD OMNI AUTO LEASING LLC</b>
STREET ADDRESS	<b>100 NW 12TH AVENUE</b>
CITY-ST-ZIP	<b>DEERFIELD BEACH FL 33442</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<b>6150 OMNI PARK DRIVE</b>
CITY-ST-ZIP	<b>MOBILE AL 36609</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>000017332520</b>
CITY-ST-ZIP	<b>04/29/03--01094--025 **526 25</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:** *[Signature]* **BY: WORLD OMNI AUTO LEASING LLC, ITS GENERAL PARTNER**  
**JOHN J. WHELAN, SECRETARY 954-420-4611**  
Date: **04/10/03** Daytime Phone # \_\_\_\_\_

STAPLE HERE

CR2E003 (10/02)