I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NEVIN C THOMAS

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business: 3518 TANGIER TERRACE SARASOTA, FL 34239

Current Mailing Address:

DOCUMENT# H03903

3518 TANGIER TERRACE SARASOTA. FL 34239 US

FEI Number: 59-2410723

Name and Address of Current Registered Agent:

THOMAS, NEVIN C. 3518 TANGIER TERRACE SARASOTA, FL 34239 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

PST Title Name THOMAS, NEVIN C. Address 3518 TANGIER TERRACE City-State-Zip: SARASOTA FL 34239

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: COMMERCIAL MANAGEMENT & LEASING CORPORATION

Certificate of Status Desired: No

Date

05/12/2019

FILED May 12, 2019 Secretary of State 0451449998CC

PRESIDENT

Date