

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
3000 BANK BUILDING
TALLAHASSEE, FLORIDA 32399-0001
TELEPHONE (904) 493-2000

FILED
SECRETARY OF STATE
CORPORATIONS

95 MAY -1 AM 11:45

DOCUMENT # 301612 (8)

AAA AUTO LEASING INC

DO NOT WRITE IN THIS SPACE

Principal Office Address: 1995 N.E. 142ND STREET NORTH MIAMI FL 33181-1505
 Mailing Address: 1995 N.E. 142ND STREET NORTH MIAMI FL 33181-1505

21. Fiscal Year (12 Months)	26. Mailing Address	4. FEI Number	5a. Date of Last Report
22. State Agent # (if any)	27. Mailing Agent # (if any)	59-1158211	04/28/1994
23. City & State	28. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
24. Zip	29. Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	30. Country	8. This corporation has liability for intangible tax under § 199.932 Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ZILBER, SIGMUND 1995 N.E. 142ND ST NORTH MIAMI FL 33161	B1. Name B2. Street Address (P.O. Box Number is Not Acceptable) B3. B4. City B5. Zip Code

11. Pursuant to the provisions of Sections 607.0807 and 607.0808, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I, hereby, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0805, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (PARTIAL)	
NAME	P STEINBERG, EDWARD 1995 N.E. 142ND ST NORTH MIAMI FL	TO NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		TO STREET ADDRESS	
CITY & STATE		TO CITY & STATE	
NAME	DS ZILBER, SIGMUND 1995 N.E. 142ND ST NORTH MIAMI FL	TO NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		TO STREET ADDRESS	
CITY & STATE		TO CITY & STATE	
NAME		TO NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		TO STREET ADDRESS	
CITY & STATE		TO CITY & STATE	
NAME		TO NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		TO STREET ADDRESS	
CITY & STATE		TO CITY & STATE	
NAME		TO NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		TO STREET ADDRESS	
CITY & STATE		TO CITY & STATE	

14. I, hereby, certify that the information supplied with this filing is accurate, complete and true and equally, for the corporation stated in Sections 199.932 (b), Florida Statutes. I further certify that the information included on this annual report or supplementary 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 this corporation or the registered office of this corporation as reported by Chapter 199, Florida Statutes, and that my name appears in Block 1, or Block 2, of changed or new information with an address.

SIGNATURE: *Sigmund Zilber* Sigmund Zilber 3/10/95 (305) 944-4422