2001	UNIFORM BUS	INESS REP	ORT (UE	JR)					
DOCU	MENT # P0000001	6834				· · · .			
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KK LEA	ASING CORPORATION			Å		FILE	D		
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Principal Plac	e of Business	Mailing Address				Y- 23	•		
	N. HAGUE ROAD	(SAME)	•		SECRET TALLAH	FARY OF	STATE		
INDIAN	NAPOLIS, IN 46256)			TALLAH	ASSEE,	FLORID	À	
					,				
2. Principal P	Place of Business	3. Mailing Address							
10201 N. HAGUE ROAD		(SAME)							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE	E IN THIS S	PACE		
City & State		City & State	· · · · · · · · · · · · · · · · · · ·	4.	FEI Number		Ar	plied For	7
INDIA	NAPOLIS, IN		T		35-2101099			t Applicable]
Zip 46256	Country USA	Zip	Country	5.	Certificate of Status Desired		8.75 Add		
	6. Name and Address of Curren	t Registered Agent		7.	Name and Address of New Ro				1
LOUIS	M. MEINERS, JR.		Nami	•					
	L'ERMITAGE LANE		Stree	t Address (P.O. E	Box Number is Not Acceptable))			1
NAPLE	S, FL 34105			· · · · · · · · · · · · · · · · · · ·	- 				1
			City				Zip Cod	^	┨
			City			FL	12000		
8. The above	named entity submits this statement f	or the purpose of changing	its registered office	or registered ag	gent, or both, in the State of Flo	rida.			
									1
SIGNATURE .	Signature, typed or printed name of registered agent	t and title if applicable. (N	OTE: Registered Agent sig	natura required when r	reinstating)	DATE	ownedd o'dd y y y y		
	Signature, typed or printed name of registered egen pration is eligible to satisfy its intangible	· MARINENOV	VIII HABBIS (SI A) B	DÁGO TO THE			\$5.0	IO May Ro	
9. This corpo	oration is eligible to satisfy its Intangible requirement and elects to do so.	e FILE YO	VIII FEE IS \$1.	0.00 \$550.00	einstating) 10. Election Campaign Fina Trust Fund Contribution	ancing _		00 May Be	
9. This corpo Tax filing r (See criter	oration is eligible to satisfy its Intangible requirement and elects to do so.	e FILE NOV After MAY 1 Make Check Pay	VIII. FEE IS \$15 2001 Fee Will be able to Departm	0.000 \$550.00 int of State	10. Election Campaign Fina Trust Fund Contribution	ancing	Addeo	d to Fees	
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13. I hereby certify that the information supplied with this filling 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE!

WILLIAM R. KELSO

4/30/2001

(317)845-5858