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MMCA Lease Ltc.

State of Rhode Island and Providence Plantations

Office of the Secretary of State

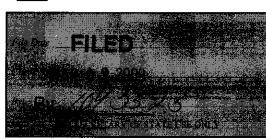
A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street. Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1• Filing Fee: \$50.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L.)

7-1.2-1501(c&d)) is subject to a	penalty fee of \$25.00.	or representations	e as annual report manners	741 J (515) C	acty's light? the time projected	ca by tan (11.1.0.b.
I. Corporate ID No. 2. Name of Corporation						
111541	MMCA Lease	e Ltd.	T.a.		<u> </u>	
3. Street Address Principal Business Office			City		State	ZIP
6450 Katella Ave. 4. Business Phone No. [5. State of Incorporation]			Cypress		CA	90630
714-372-6000 Delaware						
6. Brief Description of the Characte	•					
A BUSINESS TRU			CLES VEHICL	F T.FZ	SES AND RELA	TED ASSETS
					NAME OF THE PROPERTY OF THE PR	Manager Control
President Name	· Vice President Name					
NONE	NONE					
Street Address	Street Address					
			:			
Cny	State	ZIP	City		State	ZIP
.		<u>.</u> . 	•			
Secretary Name	Treasurer Name					
Street Address			Street Address			
C'iii	Tp	1 210	· · · · · · · · · · · · · · · · · · ·		Ta	Lan
City	State	ZIP	: City		State	ZIP
Regulation of State of the Stat	ing Ok Alfin Digital	HB: Y'SI' BOX FOR AT				WENNESDS
Director Name			Director Name			
NONE Street Address			· Street Address			
Street Address			Weet Address			
City	State	ZIP	: City		State	ZIP
Director Name	Director Name					
Street Address			Street Address			
City	State	ZIP	: Clty		State	ZIP
MATERIAL SAME AND THE SAME			To STARYS ISSUED	Anna Cara		
			ISSUED SHARES — TH	IS SECTION		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares		Class/Series	Par Value
			NONE	0	N/A	
			1,010		,	
This report must be execute	d on behalf of the co	rnoration by an authoriz	I red representative. If the	e cornora	tion is in the hands of	I a receiver or trustee
this report must be executed				Corpora	aron to in the hands of	10001101 01 0103000
		• • • • • • • • • • • • • • • • • • • •				



WK4P RIN11T-001 17

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Jeffrey Young

Print or Type Name

President, MMCA, Inc. as Administrator for MMCA Lease Ltd. Title

Form 630 Rev. 08/08