


**FILED**  
**Apr 27, 2006 08:00 AM**  
**Secretary of State**

**2006 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

<b>DOCUMENT # 656829</b> 1. Entity Name <b>A-1 KEN PHILLIPS ECONOMY CAR RENTAL, INC.</b>	
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Principal Place of Business 1921 N. DIXIE HWY. POMPANO BEACH, FL 33060-5045	Mailing Address 1921 N. DIXIE HWY. POMPANO BEACH, FL 33060-5045
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04242006 . . . No Chg-P      CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-1975254</b>	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

8. Name and Address of Current Registered Agent

**PHILLIPS, KENNETH**  
**5030 NE 26 TERR**  
**LIGHTHOUSE POINT, FL 33064**

DO NOT WRITE  
 IN THIS SPACE

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, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when amending.)

FILE NOW!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	PHILLIPS, KENNETH
NAME		5030 NE 26 TERR
STREET ADDRESS		LIGHTHOUSE POINT, FL 33064
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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100000539552  
 05/09/06-80106-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Handwritten Signature]*      4-27-06      954906-9150