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**Jan 27 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 819124 (9)

1. Corporation Name
HERTZ EQUIPMENT RENTAL CORPORATION



Principal Place of Business 225 BRAE BLVD. PARK RIDGE NJ 07656 US	Mailing Address 225 BRAE BLVD. PARK RIDGE NJ 07656-1870 US
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3. Date Incorporated or Qualified 11/01/1965	3a. Date of Last Report 05/01/1996
4. FEI Number 13-6174127	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt #, etc City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt #, etc City & State 28 Zip 29	Country 25	Country 30
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9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature based on printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	BLAKE, JOHN E.	
STREET ADDRESS	225 BRAE BOULEVARD	
CITY-ST-ZIP	PARK RIDGE, NJ.	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	SIDER, WILLIAM	
STREET ADDRESS	225 BRAE BOULEVARD	
CITY-ST-ZIP	PARK RIDGE, NJ.	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	KAPLAN, DANIEL I	
STREET ADDRESS	225 BRAE BOULEVARD	
CITY-ST-ZIP	PARK RIDGE, NJ.	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	SZOT, JOHN	
STREET ADDRESS	225 BRAE BOULEVARD	
CITY-ST-ZIP	PARK RIDGE, NJ.	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MADGETT, ROBERT K.	
STREET ADDRESS	225 BRAE BLVD.	
CITY-ST-ZIP	PARK RIDGE, NJ.	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	TSCHIRHART, PAUL M.	
STREET ADDRESS	225 BRAE BLVD.	
CITY-ST-ZIP	PARK RIDGE, NJ.	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John Szot* **John Szot** *Pres. Secy* **1/27/97** **201.307.2366**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

HERTZ EQUIPMENT RENTAL CORPORATION
DIRECTORS AND OFFICERS

DIRECTORS

Daniel I. Kaplan

OFFICE ADDRESS

**225 Brae Boulevard
Park Ridge, NJ 07656**

William Sider

**225 Brae Boulevard
Park Ridge, NJ 07656**

Paul M. Tschirhart

**225 Brae Boulevard
Park Ridge, NJ 07656**

OFFICERS

OFFICE ADDRESS

**~~Daniel I.~~ Daniel I. Kaplan
President**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**John E. Blake
Vice President**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Robert K. Madgett
Vice President**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Gerald Plescia
Vice President**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**William Sider
Vice President**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Paul M. Tschirhart
Vice President and
Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Robert H. Rillings
Treasurer**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Michael Puleio
Controller**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Lauren S. Babus
Assistant Treasurer**

**225 Brae Blvd.
Park Ridge, NJ 07656**

**Diane E. Branch
Assistant Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Robert M. Hurwitz
Assistant Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**I. David Parkoff
Assistant Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**Robert S. Regan
Assistant Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**John J. Slattery, Jr.
Assistant Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**

**John M. Szot
Assistant Secretary**

**225 Brae Boulevard
Park Ridge, NJ 07656**