2002 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # P0100066546 L Entity Name GLOBAL RENT-A-CAR OF SOUTH FLORIDA, INC. | | | | Secretary of State 02-20-2002 90030 009 ***150.00 |
|---|--|-----------------------------|---|---|
| Principal Place of Business Mailing Address 3256 NW 24 STREET RD 3256 NW 24 ST MIAMI FL 33142 MIAMI FL 33142 | | | | 1984 981 1) 88181 1841 1851 8811 8811 881 881 8 148 148 811 811 811 811 811 |
| 2. Principal Place of Business | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | DO NOT WRITE IN THIS SPACE |
| City & State | | City & State | | 4. FEI Number Applied For Not Applicable |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| | 6. Name and Address of Current R | egistered Agent | | 7. Name and Address of New Registered Agent |
| | | | Name | ROBERT MATAZON |
| MEDEROS, RALPH 4114 NW 4 TERR | | | | ess (P.O. Box Number is Not Acceptable) |
| Miami Fl | . 33126 | | City | MIAMI FL Zip Code 142 |
| | | | <u>_</u> | MIAMI FL ZPZOG 14V |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signal | | | PRESIS \$150.00 PRESIS \$150.00 PRESIS \$550.00 | 10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| 11. | OFFICERS AND D | IRECTORS | 12. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP LLANES, ALFONSO 1090 WATERSIDE LN HOLLYWOOD FL 33019 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV MEDEROS, ANTONIO 8825 SW 60 ST MIAMI FL 33173 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| IITLE NAME Street adoress City-St-Zip | DST. MATALON, ROBERTO 1701 NE 198 TERR MIAMI FL 33179 | - □ Delete - | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| ITLE IAME STREET ADDRESS CITY-ST~ZIP | | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| TITLE NAME STREET ADDRESS STY-ST-ZIP | | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| indicated | on this report or supplemental report is t | rue and accurate and that m | ny signature shall have | n Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if |