FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400000652 (5)

KEN & MARY RENTALS INC.

FILED May 04 1998 8:00am Secretary of State



2. Principal P 21 7 1 1 C Suite, Apt. 22 4 City & Stat 23 () (Place of Business COUCL TCH LOTS H 81c. Country	26. Mailing Address Suite, Apt J., etc. 27. 41 Cut. 28. City & State 28. Zip	TO + KC	L	DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 01/04/1994 4. FEI Number 59-3202500 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid the cu	\$8.75 Fee F \$5.00 Added	pplied For lot Applicable Additional lequired May Be to Fees
20 E 10		yeart Begistered Agent		<u> 242</u>	Personal Property Tax due June 30. 10. Name and Address of New Registered		□No
9. Name and Address of Current Registered Agent BRODE, MARY 4619 GATE PLACE ORLANDO FL 32811				Name Street Add	dress (P.Ö. Box Number is Not Acceptable)	ØE Zin	Code
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida Statules,	the above	e-named cor	rporation submits this statement for the purpose	of changing	its registered
office or r agent. Le	registered agent, or both, in the Similar with, and accept the c	State of Florida. Such change was auth obligations of, Section 607.0505, Floric	horized by ta Statutes	the corpora s.	ation's board of directors. I hereby accept the ap	pointment a	s registered
SIGNATURE							
12.	Signature, typed or printed name of regularion OFFICE RS	od agent and tille if applicable (NOTE R SIAND DIRECTORS	egistered Ago	nt signature requ	DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	PST	DELETE	1.1 TOTLE		7,001110110111111021107111	Change	Addition
NAME	BRODIE, MARY		1.2 NAME				
STREET ADDRESS	4819 GATE PLACE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 CITY - S				
TITLE		DELETE	2.1 TITLE	1-211		Change	Addition
NAME			2.2 NAME	{			
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2.4 CITY-8	Ī			Ì
TITLE	DELETE		3.1 TITLE	31-11		Change	Addition
NAME	_		3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY- S	Į.			
TITLE	-	DELÉTE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME			-	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CiTY - S				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S	T - ZIP			
TITLE		☐ DELETE	6.1 TITL€			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S				
indicated officer or	on this annual report or supplen	nental annual report is true and accura- receiver or trustee empowered to exe	ate and the	at my signati	n Section 119.07(3)(i), Florida Statutes. I further our shall have the same legal effect as if made unquired by Chapter 607, Florida Statutes; and that	nder oath; th	natlam an 📑