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May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90088 003 \*\*\*150.00

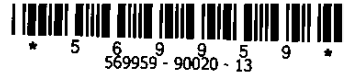
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PROFIT CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Matthews Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000042477 ✓  
1. Corporation Name



Principal Office Mailing Address  
ARROW RENT-A-CAR  
903 EAST 93RD AVENUE  
TAMPA, FL 33612  
(813) 932-9620

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
21		2b		9/96		59-3384938		Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired		6. Election Campaign Financing		\$8.75 Additional Fee Required	
23 City & State		28 City & State		<input type="checkbox"/>		<input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip		29 Zip		30 Country		31 Country		8. This corporation owes the current year intangible Personal Property Tax.	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
STULL, R. JEFFREY 602 S BLVD TAMPA, FL 33606				81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)				83			
84 City				85 FL			
86 Zip Code				87			

11. Pursuant to the provisions of Sections 607.0542 and 607.1608, 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: *[Signature]* DATE: 5/19/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	DP FONSECA, ANTHONY J. 903 E. 93RD AVENUE TAMPA, FL 33612	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VP MENENDEZ, JANICE M. 903 E. 93RD AVENUE TAMPA, FL 33612	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 the 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 or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* JANICE M. MENENDEZ 4/24/99 (813) 932-9620  
ARX CR 25110 - 4/24/99 - \$155.00 CC: CORP BOOK - ANNUAL REPORT FILE

CR2E004 (1/1988)