

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

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**Feb 04 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000048812 (7)

1. Corporation Name
GENERAL RENT A CAR, INC.



Principal Place of Business Mailing Address
~~5151 COLLINS AVENUE, SUITE 1020~~
~~MIAMI BEACH FL 33140~~ ~~5151 COLLINS AVENUE, SUITE 1020~~
~~MIAMI BEACH FL 33140-2716~~

3. Date Incorporated or Qualified 3a. Date of Last Report
06/07/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21	3300 N.E. 192 Street	26	3300 N.E. 192 Street	65-0670280		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
22	L.P. #12	27	L.P. #12	<input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>	
23	AVENTURA, Florida	28	AVENTURA, Florida	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	Zip 33180	25	Country USA	29	Zip 33180	30	Country USA

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
AMERILAWYER CHARTERED				81 Name			
343 ALMERIA AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33134				83			
				84 City			
				85 Zip Code			
				FL			

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: Ralph Mizrahi **RALPH MIZRAHI** 1-14-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD <input type="checkbox"/> DELETE	1.1 TITLE	PSTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIZRAHI, RALPH S	1.2 NAME	MIZRAHI, RALPH S
STREET ADDRESS	5151 COLLINS AVENUE, SUITE 1020	1.3 STREET ADDRESS	3300 N.E. 192 STREET L.P. #12
CITY-ST-ZIP	MIAMI BEACH FL 33140	1.4 CITY-ST-ZIP	AVENTURA, Florida 33180
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 if changed, or on an attachment with an address.

SIGNATURE: Ralph Mizrahi **RALPH MIZRAHI** 1-14-97 305-705-0505
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CRE034 (9/96)