

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED

03 OCT -2 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100023662831
10/09/03--01023--005 **158.75

REINSTATEMENT 03

CORPORATION REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>996000048812</u>			
1. Corporation Name <u>General Rent A Car, Inc.</u>			
2. Principal Office Address <u>2100 W. 76th Street</u> Suite, Apt. #, etc. <u>305</u> City & State <u>Hialeah FL.</u> Zip Country <u>33016 USA</u>		3. Mailing Office Address <u>2100 W. 76th Street</u> Suite, Apt. #, etc. <u>305</u> City & State <u>Hialeah FL.</u> Zip Country <u>33016 USA</u>	

4. Date Incorporated or Qualified To Do Business in Florida <u>JUNE 1996</u>	
5. FEI Number <u>65-0670280</u>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent			
Name <u>Ralph Mizrahi</u>			
Street Address (P.O. Box Number is Not Acceptable) <u>2100 W. 76th Street</u>			
Suite, Apt. #, Etc. <u>#305</u>			
City <u>Hialeah</u>	State <u>FL</u>	Zip Code <u>33016</u>	

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Ralph Mizrahi Date 10-1-03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Ralph Mizrahi	2100 W. 76 th St. #305	Hialeah, FL. 33016
V.P.			
Sec			
Treas			

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Ralph Mizrahi Ralph Mizrahi Date 10-1-03 305 Daytime Phone # 776-1777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (10/02)

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