

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 05, 2007 8:00 am
Secretary of State

07-05-2007 90061 027 ***150.00

DOCUMENT # V73782

1. Entity Name

EXPRESS RENT-A-CAR SYSTEMS, INC.



Principal Place of Business

13727 S.W. 152ND ST.
 #226
 MIAMI FL 33177

Mailing Address

13727 S.W. 152ND ST.
 #226
 MIAMI FL 33177



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

1825 PONCE DE LEON BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

498

2nd MOORE

CR2E034 (4/07)

City & State

City & State

CORAL GABLES, FL

4. FEI Number

65-0364244

Applied For

Not Applicable

Zip

Country

Zip

Country

33134

MIAMI-DADE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALDES, J.
 13727 S.W. 152ND ST.
 #226
 MIAMI FL 33177

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

FILE NOW!!! FEE IS \$550.00
DUE BY September 5, 2007

Make Check Payable to Florida Department of State

S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> Delete |
|-------|------------------|---------------------------|-----------------|---------------------------------|
| M | VALDES, FJOAQUIN | 13727 S.W. 152ND ST. #226 | MIAMI FL 33177 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|------|----------------|-----------------|---------------------------------|-----------------------------------|
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-29-07

305-876-9700

Date

Telephone #

EXPRESS
RENT-A-CAR

ATTACHMENT 40122974

1825 Ponce De Leon Blvd., #498 Coral Gables, Florida 33134

Where Our Customers Come First! • (305) 876-9700

May 29, 2007

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, FL 32314

RE: Express Rent A Car Systems, Inc. Document # V73782

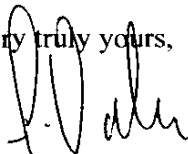
Dear Sirs:

In 2006 I requested a change of mailing address at the same time that I requested the Annual Report filing forms be sent instead of the small cards.

Pursuant to my conversation with your employee Greg, I am submitting this request to remove the penalty fees of \$400.00 and also request the Annual Reporting forms be sent instead of the cards.

Thank you in advance for your kind attention.

Very truly yours,



Fernando J. Valdes
General Manager

~~AIRLINER HOTEL, 4150 N.W. 25th Street, Miami, Florida 33142~~

~~Mailing Address: 13727 S.W. 152 Street, Suite 226, Miami, Florida 33177-1106~~