

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003762

Entity Name: PAYLESS CAR RENTAL, INC.**Current Principal Place of Business:**6 SYLVAN WAY
PARSIPPANY, NJ 07054**Current Mailing Address:**6 SYLVAN WAY
PARSIPPANY, NJ 07054 US**FEI Number:** 91-0886075**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*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.***SIGNATURE:** MAUREEN CATHELL

04/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name JOHNSON, ERIK
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title ASST. SECRETARY
Name GALLAGHER, PAUL
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR, CEO
Name DE SHON, LARRY DEAN
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title VP
Name MUHS, ROBERT E
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title VP
Name BOUTA, ROBERT F
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title ASST. TREASURER
Name INFANTE, MICHAEL
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name FERRARO, JOSEPH ANTHONY
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Title DIRECTOR
Name NORTH, JOHN F
Address 6 SYLVAN WAY
City-State-Zip: PARSIPPANY NJ 07054

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ERIK JOHNSON

SECRETARY

04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|---------------------|
| Title | VP, TAX |
| Name | PEROS, JULIETTE |
| Address | 6 SYLVAN WAY |
| City-State-Zip: | PARSIPPANY NJ 07054 |