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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

354873

(2)

FILED Mar 27 1998 8:00am Secretary of State

Principal Place RENTAL CO 1101 HILLOF	DA CONDOMINIUM SALES DE OF Business DINC REST DRIVE	Mailing Address RENTAL CO INC 1101 HILLCREST DRIVE	.		
HOLLYWOO	D FL 33021	HOLLYWOOD FL 33021		DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified 11/05/1969	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number 59-1405767	Applied For
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Currer	29 29 Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
Tr	OBIN, HERBERT A	и надрегатал мадин	81 Name	tu, mante and Address of new Registe	red Agent
1101 HILLCREST DR HOLYWOOD, FL 33021				dress (P.O. Box Number is Not Acceptable)	
ſ			84 City		85 Zip Code
11. Pursuant office or a agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered age	ations of, Section 607.0505, Flo	iuthorized by the corporarida Statutes.	rporation submits this statement for the purpo ation's board of directors. I hereby accept the uired when reinstating)	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	TOBIN, HERBERT A		1.2 NAME		
STREET ADDRESS	1101 HILLCREST DR		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	HOLLYWOOD, FL 00000		1.4 CITY-ST-ZIP		
TITLE	VD TOPIN IACON I	☐ DELET e	2.1 TITLE		Change Addition
NAME	TOBIN, JASON L 1101 HILLCREST DRIVE		2.2 NAME		
STREET ADDRESS	HOLLYWOOD FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	SD SD	DELETE	2. 4 C/TY - ST - Z/P 3.1 T/TLE		Choose Addition
NAME	DAMIAN, VINCENT E.		3.1 ITILE		Change Addition
STREET ADDRESS	1101 HILLCREST DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	_		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	<u> </u>	
TITLE		☐ DELET E	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		ļ

14. I 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 only attachment with applicables.

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