

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 361169 (6)

1. Corporation Name

RENTAL SYSTEMS OF HIALEAH INC

Principal Place of Business

897 EAST 25TH STREET  
HIALEAH FL 33013

Mailing Address

897 EAST 25TH STREET  
HIALEAH FL 33013



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

29

30

RUSHING, DERK  
1351 NE 102 ST  
MIAMI, FL  
MIAMI SHORES FL 33138

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.002 and 607.1505, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.005, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

Date

12. OFFICERS AND DIRECTORS

| TITLE | NAME              | STREET ADDRESS          | CITY-STATE-ZIP  | DELETE                   |
|-------|-------------------|-------------------------|-----------------|--------------------------|
| P     | RUSHING, DERK     | 1351 NE 102 ST          | MIAMI SHORES FL | <input type="checkbox"/> |
| T     | RUSHING, PATRICIA | 275 N BISCAYNE RIVER DR | MIAMI, FL 3     | <input type="checkbox"/> |
| S     | RUSHING, MIRIAM   | 1351 NE 102 ST          | MIAMI SHORES FL | <input type="checkbox"/> |
|       |                   |                         |                 | <input type="checkbox"/> |
|       |                   |                         |                 | <input type="checkbox"/> |
|       |                   |                         |                 | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 the address.

SIGNATURE:

*Miriam Rushing*

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

MIRIAM RUSHING

4/8/96

305/688-6677

Telephone

CR2E034 (12/95)