2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 27, 2000 8:00 am **DOCUMENT # 591416 Secretary of State** A-1 USED CAR RENTAL, INC. 01-27-2000 90105 038 ***150.00 Mailing Address Principal Place of Business 11587 OVERSEAS HIGHWAY 11587 OVERSEAS HIGHWAY MARATHON SHORES FL 33050 MARATHON SHORES FL 33050-3630 OFFULLACO 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 11587 Oversea 1587 Overses Applied For 4. FEI Number 59-1881865 Not Applicable Marath \$8.75 Additional 5. Certificate of Status Desired USA Fee Required USA 3050 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RAMSEY, RICHARD A. Street Address (P.O. Box Number is Not Acceptable) 11587 OVERSEAS HIGHWAY MARATHON SMEETES FL 33055 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) , This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition TITLE, ☐ Delete TITI F RAMSEY, RICHARD A. NAME STREET ADDRESS STREET ADDRESS 11587 OVERSEAS HWY. CITY-ST-ZIP CITY-ST-ZIP MARATHON STEERS FL Change ☐ Addition TITI F □ Delete TITLE RAMSEY, THEADORA M. NAME NAME STREET ADDRESS STREET ADDRESS 11587 OVERSEAS HWY. CITY-ST-ZIP CITY-ST-ZIP MARATHON SECURES FL Change Addition TITI F □:Delete~~ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete -TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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 11 or Block 12 if changed, or on an attachment with an address. With all other like empowered.

They Kamsay Sec.

Daytime Phone #