

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90152 003 ***150.00

DOCUMENT # 852627

1. Entity Name
BUDGET RENT-A-CAR SYSTEMS, INC.

Principal Place of Business

**4225 NAPERVILLE RD.
 LISLE IL 60532**

Mailing Address

**4225 NAPERVILLE RD.
 LISLE IL 60532**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **36-2603118**

Applied For

Not Applicable

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

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO	<input type="checkbox"/> Delete
NAME	MILLER, SANFORD	
STREET ADDRESS	125 BASIN ST	
CITY-ST-ZIP	DAYTONA BCH FL 32114	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	BOBEK, MARK	
STREET ADDRESS	4225 NAPERVILLE RD.	
CITY-ST-ZIP	LISLE IL 60532	
TITLE	AT	<input type="checkbox"/> Delete
NAME	OLSBURG, JEFFREY E.	
STREET ADDRESS	4225 NAPERVILLE RD	
CITY-ST-ZIP	LISLE IL	
TITLE	V	<input type="checkbox"/> Delete
NAME	APRATI, ROBERT L.	
STREET ADDRESS	4225 NAPERVILLE RD	
CITY-ST-ZIP	LISLE IL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Miller, Sanford	
STREET ADDRESS	125 Basin Street, Suite 210	
CITY-ST-ZIP	Daytona Beach, FL 32114	
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sotir, Mark	
STREET ADDRESS	4225 Naperville Road	
CITY-ST-ZIP	Lisle, IL 60532	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Olsberg, Jeffrey E.	
STREET ADDRESS	4225 Naperville Road	
CITY-ST-ZIP	Lisle, IL 60532	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Aprati, Robert L.	
STREET ADDRESS	4225 Naperville Road	
CITY-ST-ZIP	Lisle, IL 60532	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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.

SIGNATURE:

Jeffrey E. Olsberg

Jeffrey E. Olsberg, Vice President, 01/15/01, 630-955-7138

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)