

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91521 023 \*\*\*150.00

DOCUMENT # F9600000 2597

1. Entity Name

National Car Rental Financing Corporation

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

48 Wall Street

Suite, Apt. #, etc.

27th fl

3. Mailing Address

48 Wall Street

Suite, Apt. #, etc.

27th fl

City & State

New York, NY

Zip

10005

Country

City & State

New York, NY

Zip

10005

Country

4. FEI Number

41-1834759

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE  
IN THIS SPACE**

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)

☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DPT  
Dean A. Christiansen  
48 Wall Street  
New York, NY 10005

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DVS  
Albert J. Fioravanti  
48 Wall Street  
New York, NY 10005

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DV  
Mary L. Brady  
48 Wall Street  
New York, NY 10005

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DAT  
Benjamin B. Abedine  
48 Wall Street  
New York, NY 10005

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DAS  
Lori Gebron  
48 Wall Street  
New York, NY 10005

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary L. Brady, MARY L. BRADY

4/15/02

212-346-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)