

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

FILED
Mar 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000005226 (3)

1. Corporation Name
RYDER TRS, INC.

Principal Place of Business
8699 NW 36TH STREET
MIAMI FL 33166

Mailing Address
8699 NW 36TH STREET
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1560 BROADWAY Suite, Apt. #, etc. 22 16TH FLOOR City & State 23 DENVER, CO Zip 24 80202	2a. Mailing Address 26 1560 BROADWAY Suite, Apt. #, etc. 27 16TH FLOOR City & State 28 DENVER, CO Zip 29 80202
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3. Date Incorporated or Qualified 10/09/1996	4. FEI Number 38-3313542	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

10. Name and Address of New Registered Agent 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 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D NAME ALIX, JAY STREET ADDRESS 8699 NW 36TH STREET CITY-ST-ZIP MIAMI FL	<input type="checkbox"/> DELETE	1.1 TITLE D 1.2 NAME JAY ALIX 1.3 STREET ADDRESS 1560 BROADWAY, 16TH FLOOR 1.4 CITY-ST-ZIP DENVER, CO 80202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE P NAME RIORDAN, GERALD R. STREET ADDRESS 8699 NW 36TH STREET CITY-ST-ZIP MIAMI FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE P 2.2 NAME RONALD A. RITTENMEYER 2.3 STREET ADDRESS 1560 BROADWAY, 16TH FLOOR 2.4 CITY-ST-ZIP DENVER, CO 80202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VD NAME RAMAEKERS, LAWRENCE J. STREET ADDRESS 8699 NW 36TH STREET CITY-ST-ZIP MIAMI FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE D 3.2 NAME ALFRED A. PIERGALLINI 3.3 STREET ADDRESS 1560 BROADWAY, 16TH FLOOR 3.4 CITY-ST-ZIP DENVER, CO 80202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VT NAME DAVISON, STEVE R. STREET ADDRESS 8699 NW 36TH STREET CITY-ST-ZIP MIAMI FL	<input type="checkbox"/> DELETE	4.1 TITLE VT 4.2 NAME STEVEN R. DAVISON 4.3 STREET ADDRESS 1560 BROADWAY, 16TH FLOOR 4.4 CITY-ST-ZIP DENVER, CO 80202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S NAME ARNST, THOMAS W. STREET ADDRESS 8699 NW 36TH STREET CITY-ST-ZIP MIAMI FL	<input type="checkbox"/> DELETE	5.1 TITLE S 5.2 NAME THOMAS W. ARNST 5.3 STREET ADDRESS 1560 BROADWAY, 16TH FLOOR 5.4 CITY-ST-ZIP DENVER, CO 80202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE AS NAME KANCHANN, GARRETT P. STREET ADDRESS 8699 NW 36TH STREET CITY-ST-ZIP MIAMI FL	<input type="checkbox"/> DELETE	6.1 TITLE AS 6.2 NAME GARRETT P. KANEHANN 6.3 STREET ADDRESS 1560 BROADWAY, 16TH FLOOR 6.4 CITY-ST-ZIP DENVER, CO 80202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 on an attachment with an address.

SIGNATURE:  **STEVEN R. DAVISON, V.P. & TREAS. 2/3/98 (303) 376-7103**

CFE034 (10/97)