


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

03-14-2008 90030 008 \*\*\*150.00

<b>DOCUMENT # F99000006518</b> 1. Entity Name <b>RYDER CAPITAL SERVICES CORPORATION</b>					
Principal Place of Business <b>11690 N.W. 105 ST MIAMI, FL 33178</b>			Mailing Address <b>11690 N.W. 105 ST MIAMI, FL 33178</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number <b>65-0966365</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired - <input type="checkbox"/>			<b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent  <b>FATOVIC, ROBERT D 11690 N.W. 105 ST. MIAMI, FL 33178</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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. I am familiar with, and accept the obligations of registered agent.			FL Zip Code		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <del>JAMIESON, MARK T.</del> 11690 N.W. 105 ST. MIAMI, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ROBERT E. SANCHEZ</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FATOVIC, ROBERT D 11690 N.W. 105 ST. MIAMI, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SUSIK, W. DANIEL 11690 N.W. 105 ST. MIAMI, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT <del>MOLL, BRADENK</del> <del>11690 N.W. 105 ST</del> <del>MIAMI, FL 33178</del>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT JOAQUIN A. ALONSO</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>11690 NW 105 ST</b> <b>MIAMI, FL 33178</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BEILIN, DAVID M 11690 N.W. 105 ST MIAMI, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT NGVY, ALFRED C 11690 N.W. 105 ST MIAMI, FL 33178	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
<b>SIGNATURE:</b> <u>Alfred Nguy</u> <b>ALFRED NGUY</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date <u>2-1-08</u> <b>ASST. TREAS.</b>					

ATTACHMENT

40045319

# F990000060518

1/1/08

**RYDER CAPITAL SERVICES CORPORATION**

(Delaware)

**OFFICERS**

ROBERT E. SANCHEZ	PRESIDENT
ROBERT D. FATOVIC	EXECUTIVE VICE PRESIDENT, CHIEF LEGAL OFFICER & CORPORATE SECRETARY
ART A. GARCIA	SENIOR VICE PRESIDENT AND CONTROLLER
W. DANIEL SUSIK	SENIOR VICE PRESIDENT AND TREASURER
DAVID M. BEILIN	ASSISTANT SECRETARY
FLORA R. PEREZ	ASSISTANT SECRETARY
JOAQUIN A. ALONSO	ASSISTANT TREASURER
CALENE F. CANDELA	ASSISTANT TREASURER
STEVEN P. GOEL	ASSISTANT TREASURER
ALFRED C. NGUY	ASSISTANT TREASURER

**DIRECTORS**

GREGORY T. SWIENTON - CHAIRMAN  
ROBERT E. SANCHEZ  
ROBERT D. FATOVIC

Business Address:  
11690 NW 105 Street  
Miami, FL 33178