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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

(1)

RYDER DRIVER LEASING, INC.

Principal Place of Business

3600 N W 82ND AVE P O BOX 020816 C/O CORPORATE TAX DEPT Mailing Address

3600 N W 82ND AVE

P O BOX 020816 C/O CORPORATE TAX DEPT

FILED

Mar 04 1998 8:00am

Secretary of State

MIAMI FL 33	102-0816	1	MIAMI FL 33102-0816						DO NOT WRITE IN THIS SPACE						
											3. Date Incorporated or Qualified				
									03/02/1983						
2. Principal P	lace of Busin	20.	26. Mailing Address						4. FEI Number	_		A	pplied For		
21					26						59-226683	3			ol Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Stat	us Desired			Additional
22					27						77 0011110010 01 0101			Fee F	berlupe
City & State					City & State						6. Election Campaig		_		May Be
23					B			0			Trust Fund Contri				to Fees
Zip		_	Country	\vdash	Zip		$\overline{}$	ountry	У		8. This corporation		_		
24		25		29			30	_,			Personal Property				_] No
9. Name and Address of Current Registered Agent									1		10. Name and Addre	ess of New H	egistered A	jent	
HERRON, JAMES M.								81	Name		VICKI A. O'	MEARA			
36			82 Street Add			Addres	ss (P.O. Box Number I		able)						
MI	ami FL 331	52						63							
									1	36	00 N.W. 82ND	. ማ ናየሙ			
								84	City	30	UU N.W. OZNI	AVE.		85 Zip	Code
								-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		MIAMI		FL		3166
11. Pursuant	to the provis	ions	of Sections 607.05	02 and 6	07.1508	3, Florida Statut	les, the	abov	e-named	corpo	ration submits this stat n's board of directors.	ement for the	purpose of c	hanging	its registered
agent. I a	m familiacwi	μοτιι βλη, α	nd accept the oblig	ations o	f. Sectio	n 607.0505, Fi	orida St	atute	ly the con is.	poratio	ris board of directors.	THEIRDY BCC	ahr ma ahbor	nuneni a	s registered
SIGNATURE		/6	1.5011	Ves	ر اب				V.P	. & ASST. SE	c.	,	2/6/9	98	
Signature, typed or printed name of registered agent and title if applicable (NOTE: F									egistered Agent signature requ		when reinstating)		DATE		
12.	1.0		OFFICERS AN	ID DIREC	CTORS		13			TAT	ADDITIONS/CHAN	IGES TO OFF			
TITLE	AT		***			DELETE		TITLE		1 '	AQUIN A. ALC	NSO	L	Change	Addition
HAME			JM, LILLIAN					NAME		1 .	00 N.W. 82ND				
STREET ADDRESS			BAND AVE						T ADDRESS		AMI, PL 331				
CITY-ST-ZIP	MIAMI,	FL (10000						ST-ZIP		•	.00		-	
TITLE	CD		41 mm 45 h h s			☐ DELETE	1	TITLE		VP'		**	L	Change	Addition
NAME			ANTHONY					NAME			YNIS A. BRYA				
STREET ADORESS	1		B2ND AVE							I	00 N.W. 32ND				
CITY-ST-ZIP	MIAMI,	FL (10000		_		_		ST-ZIP	<u> </u>	AMI, FL 331	.66			
TITLE	VAT					☐ DELETE		TITLE		VP			L	Change	Addition
NAME	HIGH, J						1	NAME			orge P. 3can				
STREET ADORESS			32ND AVE				3.3	STREE	T ADDRESS		00 N.W. 32ND				
CITY-ST-ZIP	MIAMI,	rl (1000			100 100 100		_	ST-ZIP	MI	<u>AMI, FL 331</u>	66	-	T &	1 4 4 4 9 1
TITLE	Y					DELETE		TITLE					L.	_] Change	Addition
NAME	1		VINCENT E.				4.2	NAME		1					
STREET ADORESS	1		B2ND AVE				4.3	STREE	T ADDRESS						
CITY-ST-ZIP	MIAMI,	FL (0000			*	4.4	CITY-	ST-ZIP	ļ				-	
TITLE	VAS					DELETE	5.1	TITLE					Ĺ	_ Change	☐ Addition
NAME			AMES M				5.2	NAME							
STREET ADDRESS			32ND AVE				5.3	STREE	T ADDRESS						j
CITY-ST-ZIP	MIAMI,	FL (0000				_	CITY-	ST-ZIP	ļ		······			
TITLE	V					DELETE	6.1	TITLE					₹.	Change	Addition
HAME			, STEVEN R.				6.2	NAME							ľ
STREET ADDRESS			82ND AVE				6.3	STREE	T ADDRESS						
CITY-ST-ZIP	MIAMI,	FL (10000			an and acception	6.4	CITY-	ST-ZIP	<u> </u>					
											anting 440 07(0)(i) Fla	wide Ctet. tee	I further and		

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 or or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ment with an address.

JOAQUIN A. ALONSO, ASST. TREASURER

2/6/98