


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 15, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # H62708**  
1. Entity Name  
**DON L. RENT-A-CAR, INC.**



Principal Place of Business      Mailing Address  
3250 N.W. 23RD AVE. 0-100      3250 N.W. 23RD AVE. 0-100  
POMPANO BEACH, FL 33069-1047      POMPANO BEACH, FL 33069-1047

**DO NOT WRITE IN THIS SPACE**



04142005    No Chg-P    CR2E034 (10/03)

4. FEI Number <b>59-2567673</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
  
**LLOYD, MAXWELL**  
3250 NW 23RD AVE  
POMPANO BEACH, FL 33069

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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.

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD LLOYD, MAXWELL 3250 NW 23 AVE., #0-100 POMPANO BCH., FL 330695903
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD COHEN, STEPHEN 3250 NW 23 AVE. 0-100 POMPANO BEACH, FL 330695903
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_ **Maxwell Lloyd**    **4/14/05**    **954.968.7900**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone if