**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **J18592**

1. Corporation Name

TOPS RENT-A-CAR, INC.

Principal Place of Business	Mailing Address
3511 N. ANDREWS AVE.	3511 N. ANDREWS AVE.

## Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90033 012 \*\*\*150.00



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							3. Date Incorporated or Qualifed					
							06/10	/1986				1
2. Principal Pi	lace of Business	2a. N	Mailing Address				4. FEI Nu	mber			App	ied For
21		26					59-26	81273			Not.	Applicable
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City & State	в	<del> </del> 1	Dity & Clate					n Campaign Financing und Contribution			ded to	, ,
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	9. Name and Address of	Cunent Registe	ieu Ageiii	8	1	Name	10. 110.110	<u> </u>				
RRAI	DLEY, D.A.			Ľ								
	BAYVIEW DR.		•	8	2	Street Address (P.O. Box Number is Not Acceptable)						
	T LAUDERDALE FL 33305			-	13							
TON	II DADDENDALL I E 00000			l°	۱۵							
	. •			8	4	City	•		FL	85	Zip Co	ode
44 Durayant	to the provisions of Sections 6	0502 and 603	7 1508 Florida Statute	es the ahn	NA.	-named corpo	oration submit	s this statement for the	numose of	changin	g its r	egistered
office or n	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the	- State of Florida	. Such change was at	utnorizea d	νι	tue corboratioi	n's board of o	lirectors. I hereby acce	pt the appoin	ntment a	as regi	stered
SIGNATURE	•							·				{
	Signature, typed or printed name of regis				gent	t signature required		ONS/CHANGES TO OF	DATE AN	D DIDE	CTO	IC IN 12
12.		RS AND DIREC		13.	_		ADDITIO	INS/CHANGES TO OF	FICERS AN	Cha		Addition
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NAME	<del>-Koehler,</del> Patricia	BRADLEY		2.2 NAM	E	Ì						
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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 or an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR REQUIRED