LIMITED LIABILITY COMPANY ANNUAL REPORT 1998 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee						1		
						1a. Principal Place of Business Address		
OFFSHORE RENTALS, L.C. 10040 S.W. 212 STREET MIAMI FL 33189						10040 S.W. 212 STREET MIAMI FL 33189		
2. Principi	al Place of Business	ng Address			3. Date Organiza	ed or Qualified	3a. State of Formation	
10090 30212 21			·			06/26/1	996	FL
Suite, Apt. #, #tc. Suite, Apr						4. FEI Number		Applied For
City & State			ate			65-0695665		
Zip	Country	Zip		Count	ry	5. Date of Last F	leport	6. Certificate of Status Desired
337	7. Name and Address of Cu		Agent			09/11/1		SB 75 Additional Fee Required
•			Ayem		Name		S OI New Regis	tered Agent/Office
HART			Street Address (P	.O. Box Number I	s Not Acceptal	bie}		
10040 S.W. 212 STREET MIAMI FL 33189					D. 11- A-t H -t-			
					Suite, Apt. #, etc.	30		77/9801082025
·					City		****	188-75 ****188.7
9. Pursua	ant to the provisions of Sections 608	.416 and 608.508	Florida Statute	s, the at	ove-named limited	liability company s	FL ubmits this state	ment for the purpose of changing
	red office or registered agent, or both red agent, and accept the obligation		rida. Such chang)e was a	uthorized by affirma	tive vote of a majori	y of the membe	s. I hereby accept the appointmen
SIGNATU	RE						DATE	
(Registered Agent Accepting Appointment) (N 10. Title Managing Members/Managers			IOTE Registered Agent signature required when reinstitung) Business Street Address			i)	City, State and Zip Code	
				· · · · · · · · · · · · · · · · · · ·				
MEM	M HARTWELL, TERRY		25500 S.W. 124TH COURT			COURT	PRINCETON FL	
1	AM HARTWELL, BOBBY		10040 S.W. 212 STREET			REET	ET MIAMI FL	
MGRM								
MGRM								
MGRM								
MGRM								
MGRM								
MGRM								
MGRM								
MGRM								
MGRM								
11. Ido hei	reby certify that the information suppl							
1. I do hei ndicated c mited liab	on this annual report is true and accu illity company or the receiver or trust	rate and that my s	signature shall hi	ave the s	same legal effect as	if made under oath	; that I am a ma	naging member or manager of the
11. I do hei ndicated c imited liab attachmen	on this annual report is true and accu	rate and that my s	signature shall hi	ave the s	same legal effect as	if made under oath 308, Florida Statute	; that I am a ma s; and that my n	naging member or manager of the