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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 31 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M06537

(8)

FLORIDA TRAILER RENTAL, INC.

Principal Plan	e of Business	Mailing Address					
9595 N.W. 89 AVENUE 9595 N.W. 89 AVENUE MEDLEY FL 33178-1405 MEDLEY FL 33178-1405							
					3. Date Incorporated or Qualified 10/17/1984	d 3a. Date of Las 01/22/199	
2. Principal F	lace of Business	2a. Mailing Address			4. FEI Number	<del></del>	Applied For
21		26			59-2463808		Not Applicable
Suite Apt.	WATER TATE	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & Stat	0	City & State			Election Campaign Financing     Trust Fund Contribution	+	O May Be d to Fees
Zip <b>24</b>	Country 25	Zip <b>29</b>	Cou <b>30</b>	ntry	<ul> <li>This corporation has liability for Florida Statutes</li> </ul>	or intangible tax unde Yes No	s. 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New	Registered Agent	
	BASTIA, ROBERTO			81 Name	Ð		
	13 SW 103 PL. IMI FL 33165			82 Street	t Address (P.O. Box Number is Not Accept	table)	
				83			
			ŀ	84 City		85 Z	p Code
44 Diseases	to the against of Custom COT O	500 and 507 ti 00 for ide Dist	Ana Aha ah			FL I I	•
onice or r	registered agent, or both, in the Sta	ite of Florida. Such change wa:	s authorized	d by the co	d corporation submits this statement for the rporation's board of directors. I hereby acc	e purpose or changing cept the appointment	ı its. registered as registered
-	im familiar with, and accept the obl	igations of Section 607,0505, I	Florida Stat	utes.			
SIGNATURE	Signature, type-dior per ledit ame of registered a	agant and the diapproable (N	OTE: Registered	Agent signatur	re required when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	DRS IN 12
T:TLE	PD OUT THE PARTY	DELETE	1.1 TO	LE		☐ Chang	Addition
NAME	CHALUJA, MARIO 242 NW 60TH AVE		1.2 NA	MĒ			
STREET ADDRESS	MIAMI FL		1.3 \$1	reet address			
CITY-ST-ZIF	TD		1.4 Ct	TY-ST-ZIP			
TITLE	SEBASTIA, ROBERTO	DELETE					
NAME		DELETE	2 1 70	Ίξ		Chang	Addition
STREET ADDRESS		DELETE	2 2 NA	LE ME		Chang	Addition
	1743 SW 103 PL.	☐ DELETE	2 2 NA 2.3 ST	'LE Me Reet adoress		Chang	Addition
COTY ST - 20F			2 2 NA 2.3 ST 2 4 Ct	LE Me Reet address Ty-st-zip			<del></del>
COY+S1+20F TOLE	1743 SW 103 PL.	DELETE	2 2 NA 2.3 ST 2 4 CO 3 1 7 II	LE Me Reet adoress Ty-St-Zip Le		Chang	<del></del>
CITY ST - ZIF TITLE NAME	1743 SW 103 PL.		2 2 NA 23 ST 2 4 CO 3 1 7 II 3 2 NA	LE Me Reet adoress Ty-st-zip Le Me			<del></del>
CITY-ST-ZIF TITLE NAME STREET ADDRESS	1743 SW 103 PL.		2 2 NA 2 3 ST 2 4 CO 3 1 7 II 3 2 NA 3 3 ST	LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS			<del></del>
CITY ST - ZIF TITLE NAME	1743 SW 103 PL.		2 2 NA 2.3 ST 2 4 CI 3 1 7 II 3 2 NA 3 3 ST 3.4 CI	LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP		Chang	e 🔲 Addition
CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIF	1743 SW 103 PL.	[_] DELETE	2 2 NA 2.3 ST 2.4 CO 3.1 TH 3.2 NA 3.3 ST 3.4 CO 4.1 TH	LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE			e [_] Addition
CHY-ST-ZIF TITLE NAME STREET ADDRESS CHY-ST-ZIF TITLE	1743 SW 103 PL.	[_] DELETE	22 NA 23 ST 2 4 CI 31 7II 32 NA 33 ST 34 CI 4.1 TII 4.2 NA	LE MME REET ADDRESS TY-ST-ZIP LE MME REET ADDRESS TY-ST-ZIP LE AME		Chang	e 🔲 Addition
CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME	1743 SW 103 PL.	[_] DELETE	22 NA 2.3 ST 2.4 CC 3.1 7H 3.2 NA 3.3 ST 3.4 CC 4.1 TH 4.2 NA 4.3 ST	LE  ME REET ADDRESS TY - ST - ZIP LE ME REET ADDRESS TY - ST - ZIP LE AME REET ADDRESS		Chang	e 🔲 Addition
CHY-ST-ZIF TITLE NAME STREET ADDRESS CHY-ST-ZIF TITLE NAME STREET ADDRESS	1743 SW 103 PL.	[_] DELETE	22 NA 2.3 ST 2.4 CC 3.1 7H 3.2 NA 3.3 ST 3.4 CC 4.1 TH 4.2 NA 4.3 ST	LE  ME REET ADDRESS TY - ST - ZIP LE ME REET ADDRESS TY - ST - ZIP LE AME REET ADDRESS IY - ST - ZIP		Chang	Addition
City+S1-2iF TITLE NAME STREET ADDRESS City+S1-2iP TITLE NAME STREET ADDRESS CITY+S1-2iF	1743 SW 103 PL.	[_] DELETE	22 NA 2.3 ST 2.4 CC 3.1 7H 3.2 NA 3.3 ST 3.4 CC 4.1 TH 4.2 NA 4.3 ST 4.4 CC	LE  ME REET ADDRESS TY - ST - ZIP LE ME REET ADDRESS TY - ST - ZIP LE AME REET ADDRESS IY - ST - ZIP LE		☐ Chang	Addition
CHY-ST-ZIF TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIF HITLE	1743 SW 103 PL.	[_] DELETE	2 2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CCI 4.1 TII 4.2 NA 4.3 ST 4.4 CCI 5.1 TII 5.2 NA	LE  ME REET ADDRESS TY - ST - ZIP LE ME REET ADDRESS TY - ST - ZIP LE AME REET ADDRESS IY - ST - ZIP LE		☐ Chang	Addition
City+S1-2iF TITLE NAME STREET ADDRESS City+S1-2iP TITLE NAME STREET ADDRESS CITY+S1-2iP TITLE NAME NAME	1743 SW 103 PL.	[_] DELETE	2 2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	LE  ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS REET ADDRESS REET ADDRESS REET ADDRESS REET ADDRESS REET ADDRESS ME ME		☐ Chang	Addition
CITY ST-ZIF TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIF TITLE NAME STREET ADDRESS	1743 SW 103 PL.	[_] DELETE	2 2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	LE  ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP		☐ Chang	Addition  Addition
CITY ST-ZIF TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIF TITLE NAME STREET ADDRESS CITY ST-ZIF TITLE NAME STREET ADDRESS CITY ST-ZIF OF AME STREET ADDRESS CITY ST-ZIF	1743 SW 103 PL.	DELETE	2 2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4. CC 4.1 TII 4.2 NA 4.3 ST 4.4 CC 5.1 TII 5.2 NA 5.3 ST 5.4 CC	LE  ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE		Chang	Addition  Addition

SIGNATURE: MARIO CHALUJA-President (305) 885-1804 1-24-9

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 on an appearance with an address.