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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # M91089

(6)

DAYTONA RENT-ALL INCORPORATION

May 01 1998 8:00am Secretary of State

FILED



Principal Place of Business Mailing Address						{	
148 POINT O	WOODS EACH FL 32114	148 POINT O WOOD DAYTONA BEACH FL	148 POINT O WOODS DAYTONA BEACH FL 32114				
US		US				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 07/27/1988	
	face of Business	2a. Mailing Address	Mailing Address			4, FEI Number	Applied For
21		[26]				59- <u>3055956</u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State				6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	_	ıntry		8. This corporation owes or has paid the cu	
24	25	<u> </u>	30	,			Yes No
	g. Name and Address of Curre	nt Hegistered Agent		81	Name	10. Name and Address of New Registered	Agent
HUGHES, BARRY E.				°'	Name		
2001 SOUTH RIDGEWOOD AVE. SOUTH DAYTONA FL 32019				82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
	OIII DAITORA I E GEOTO			83			
]				84	City		85 Zip Code
			-			FL	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Sta	atules, the a	bove	-named corp	poration submits this statement for the purpose of	of changing its registered
agent. La	m familiar with, and accept the oblig	ations of, Section 607.0505	, Florida Sta	tutes	тне вогрогат 3.	tion's board of directors. I hereby accept the app	Jointine it as registered
SIGNATURE Signature, typied or printed name of tage tenid agent and life if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
<u> </u>	Signature, typed or printed name of regelier diag	ID DIRECTORS		a Age	nt signature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTODO IN 10
12.	D	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	AARTER HIDERT		1.2 N				- Consultan
STREET ADDRESS	AATA DIDODUOAD ALE		1.3 STREET ADDRESS		Aryporce		į.
CITY-ST-ZIP	OT ODANICE EL		1.4 CITY-ST-ZIP].
TITLE	DELETE 2.1			1 - 2.15		Change Addition	
NAME	OLDTED LOUICE		22 N				
STREET ADDRESS	AATA DIDOCHOOD AND				ADDRESS		
CITY-ST-ZIP	OT ODANGE EI				ST - ZIP		
TITLE	D						Change Addition
NAME	ALOTTO ADAM		32 N				
STREET ADDRESS	3670 RIDGEWOOD				ADDRESS		
C/TY-ST-ZIP	PT. ORANGE FL				ST-ZIP		
TITLE	0	DELETE 41					☐ Change ☐ Addition
NAME	Carter, Johanna		4.21	IAME			·
STREET ADDRESS	3670 RIDGEWOOD AVENUE		- 1		ADDRESS		
CITY-ST-ZIP	PT. ORANGE FL			ITY-S			
TITLE		DELETE	5.1 T(Change Addition
NAME			5 2 N	AME			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	:		4	ITY-S			
TITLE		☐ DELETE					Change Addition
NAME	••		6.2 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP				(TY-SI			
	certify that the information supplied y	with this filling does not quali				Section 119 07/3\(\text{i}) Florida Statutes I further o	ertify that the information

14. I nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplienental annual report is true and adcurate 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 the receiver or trustee empanyered in execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, informal attainment with an address.

1107-00

914 757 1869