

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90128 020 ***558.75

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DOCUMENT # P00000033022

1. Entity Name

EXECUTIVE AUTO RENTAL, CORP.

(L4)

Principal Place of Business

**4121 NW 25 ST
 MIAMI FL 33142**

Mailing Address

**4121 NW 25 ST
 MIAMI FL 33142**

2. Principal Place of Business

4121 NW 25 ST

3. Mailing Address

4121 NW 25 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI FL

4. FEI Number

65-0996051

Applied For

☒ Not Applicable

Zip

33142

Country

MIAMI DADE

Zip

33142

Country

MIAMI DADE

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CABRERA, ORLANDO

**4121 NW 25 ST
 MIAMI FL 33142**

Name **MANUEL MONEGRO**

Street Address (P.O. Box Number is Not Acceptable)
4121 NW 25 STREET

City **MIAMI**

FL

Zip Code **33142**

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.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **VICE PRESIDENT** ☐ Delete
 NAME **CABRERA, ORLANDO**
 STREET ADDRESS **4121 NW 25 ST**
 CITY-ST-ZIP **MIAMI FL 33142**

TITLE **SD** ☒ Delete
 NAME **MORILLO, ROBERTO**
 STREET ADDRESS **4121 NW 25 ST**
 CITY-ST-ZIP **MIAMI FL 33142**

TITLE **VICE PRESIDENT** ☐ Delete
 NAME **MANUEL MONEGRO**
 STREET ADDRESS **4121 NW 25 ST**
 CITY-ST-ZIP **MIAMI FL 33142**

TITLE **SECRETARY** ☐ Delete
 NAME **Wilson Morillo**
 STREET ADDRESS **4121 NW 25 ST**
 CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERTO MORILLO

07/03/2001

(305) 871-9995

Date

Daytime Phone #

CR2E034 (5/01)