

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046739

Entity Name: E-Z CAR RENTAL, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

6345 SR 80
ALVA, FL 33920

New Principal Place of Business:

6345 WEST ST RD 80
LABELLE, FL 33935

Current Mailing Address:

6345 SR 80
ALVA, FL 33920

New Mailing Address:

6345 WEST ST RD 80
LABELLE, FL 33935

FEI Number: 65-1011437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUISTINA, PETER A
14700 DUKE HWY
ALVA, FL 33920 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GIUSTINA, PETER A
Address: 14700 DUKE HWY
City-St-Zip: ALVA, FL 33920

Title: SEC () Delete
Name: GIUSTINA, LORI J
Address: 14700 DUKE HWY
City-St-Zip: ALVA, FL 33920

Title: VP () Delete
Name: DORN, LORNE
Address: 5552 FRONTIER CIR
City-St-Zip: LABELLE, FL 33935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GIUSTINA, PETER A
Address: 14700 DUKE HWY
City-St-Zip: ALVA, FL 33920

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PTD (X) Change () Addition
Name: DORN, LORNE H
Address: 2460 FRONTIER CIR
City-St-Zip: LABELLE, FL 33935

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORNE H DORN

PTD

04/27/2009

Electronic Signature of Signing Officer or Director

Date