2006 FOR PROFIT CORPORATION ANNUAL REPORT				FILED May 01, 2006 8:00 am Secretary of State	
DOCUMENT # P0000062893 1. Entity Name DIAMOND CAR RENTAL CORPORATION				<b>Secretary of State</b> 05-01-2006 90309 014 ***158.75	
Principal Place of Business Mailing Address			Contrat	_	
3935 NW 26TH ST. MIAMI, FL 33142	3935 NW 26TH ST. Miami, FL 33142	935 NW 26TH ST.			
2. Principal Place of Business	3. Mailing Address	Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			04202006 Chg-P CR2E034 (11/05)	
City & State	City & State			4. FEI Number Applied For   65-1020307 Not Applicable	
Zip Country	Zip	Count	iry	5. Certificate of Status Desired Status Peer Required	
6. Name and Address of Current	Registered Agent		Name	7. Name and Address of New Registered Agent	
CASTELLANOS, MEINARDO 14231 SW 34TH ST. MIAMI, FL 33175			Street Address (P.O. Box Number is Not Acceptable)		
			City	FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
FILE NOW!!! FEE 13 \$150.00 After May 1, 2006 Fee will be \$550.(	9. Election Campa Trust Fund Con	-	· _ •	5.00 May Be Ided to Fees	
10. OFFICERS AND		11. TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME CASTELLANOS, MEINARDO STREET ADDRESS 14231 SW 34TH ST. CITY-ST-ZIP MIAMI, FL 33175	CASTELLANOS, MEINARDO NV 14231 SW 34TH ST. ST		ET ADDRESS	Stellanos Harold Change Maddition 379 sw 50 terrace. Canw, FL 33185	
TITLE VPD NAME ILQUIERDO, FILENO J STREET ADDRESS 13416 S.W. 68 TERR. CITY-ST-ZP MIAMI, FL 33183	ILQUIERDO, FILENO J NAM   13416 S.W. 68 TERR. STRE   MIAMI, FL 33183 CITY   TD Street   CASTELLAMOS, HAROLD NAM   5880 COLLINS AVE APT#806 STRE   MIAMI, FL 33140 CITY			Change Addition	
TTLE TD NAME CASTELLAMOS, HAROLD STREET ADDRESS 5880 COLLINS AVE APT#806				Change Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP				🗋 Change 🋄 Addition	
TITLE NAME STREET ADDRESS CITY- ST-ZIP	🗋 Delete			🛄 Change 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	🗋 Delete	CITY-	E ET ADDRESS • ST - ZIP	Change Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other information.					
SIGNATURE: 7/J0/04 305 310-0/90 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (329 DRYSTIG PIONS 7					