

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2002 8:00 am
Secretary of State

05-13-2002 90186 004 ***150.00

DOCUMENT # P01000012477

1. Entity Name
CHOICE CAR RENTALS, INC.

Principal Place of Business
**8770 N.W. 27TH AVENUE
MIAMI FL 33147**

Mailing Address
**8770 N.W. 27TH AVENUE
MIAMI FL 33147**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2705 NW 87TH
Suite, Apt. #, etc.

3. Mailing Address
370 Flamingo Rd
Suite, Apt. #, etc.
PMB #326

City & State
MIAMI, FL.
Zip
33147 Country
US

City & State
Pembroke Pines FL.
Zip
33027 Country
US

4. FEI Number
06-161299 Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VARGAS, RICHARD
320 FLAMINGO ROAD
PEMBROKE PINES FL 33028**

7. Name and Address of New Registered Agent

Name
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.

SIGNATURE *Julia Vargas* 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 \$150.00
After May 1, 2002 Fee will be \$550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST VARGAS, JULIA <input type="checkbox"/> Delete 12921 N.W. 2ND STREET, #202 PEMBROKE PINES FL 33028	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Julia Vargas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/01)