## 2004 FOR PROFIT CORPORATION

## Apr 16, 2004 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P01000022263** 04-16-2004 90106 017 \*\*\*150.00 1. Entity Name TARSAN RENT-A-CAR, INC. Principal Place of Business Mailing Address 24443334 1255 US HWY 41BYPASS 1255 41 BYPASS S **VENICE, FL 34292** VENICE, FL 34292 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02232004 Cha-P 4. FEI Number Applied For City & State City & State 65-1088592 Not Applicable Country · Zip-----Country \$8.75 Additional 5. Certificate of Status Desired . Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TARSAN, REBECCA E Street Address (P.O. Box Number is Not Acceptable) 1255 41 BYPASS S VENICE, FL 34292 City 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ■ Addition TITLE ☐ Delete TITLE NAME TARSON, REBECCA E NAME 1818 ROOSEVELT DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VENICE, FL 34293 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change Change Addition TITLE ☐ Delete TITLÉ NAME NAME STREET ADDRESS STREET ADDRESS

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12. 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 10 or Block 11 if

with an address, with all other likerempowered

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changed, or on an attachmen

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