

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018679

FILED
Sep 08, 2004
Secretary of State

Entity Name: KINGDOM CAR RENTALS, INC.

Current Principal Place of Business:

3730 WEST BROWARD BLVD
FT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3730 WEST BROWARD BLVD
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 36-4488801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, U JAMES
1600 CYPRESS POINT DRIVE
CORAL SPRINGS, FL 33312 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: LEWIS, JAMES
Address: 1600 CYPRESS POINT DR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEWIS, JAMES
Address: 3730 WEST BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: SD () Change (X) Addition
Name: MCCARTHY, KAREN Y
Address: 1601 E GOLFVIEW DRIVE
City-St-Zip: PEMBROKE PINES, FL

Title: D () Change (X) Addition
Name: WALTERS, DONOVAN
Address: 3730 WEST BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33312 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN MCCARTHY

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09/08/2004

Electronic Signature of Signing Officer or Director

Date