2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018679

Address:

City-St-Zip:

FILED Apr 19, 2005 Secretary of State

Entity Nai	me: KINGDO	VI CAR RENTALS, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	ST BROWARD ERDALE, FL 3					
Current M	lailing Addres	ss:	New Mailing Address:			
	ST BROWARD ERDALE, FL 3					
FEI Number	: 20-1470448	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Address of	f New Registered Agent:	
	JAMES RESS POINT I PRINGS, FL 3		LEWIS, U JAMES 3730 WEST BROWARD BLVD FORT LAUDERDALE, FL 33312 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE:				04/19/2005		
	Electron	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LEWIS, JAMES 3730 WEST BI) Delete S ROWARD BLVD DALE, FL 33312 US	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (MCCARTHY, K 1601 E GOLFV PEMBROKE P	IEW DRIVE	Title: Name: Address: City-St-Zip:	MCCARTHY, 1601 E GOL	(X) Change () Addition KAREN Y FVIEW DRIVE PINES, FL 33027	
Title: Name: Address: City-St-Zip:	WALTERS, DC 3730 WEST BI) Delete NOVAN ROWARD BLVD DALE, FL 33312 US	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	BROWN, WI 3730 WEST	()Change(X)Addition LFRED BROWARD BLVD ERDALE, FL 33312	
Title: Name:	() Delete	Title: Name:		() Change (X) Addition ROSEMARIE	

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.

Address:

City-St-Zip:

3730 WEST BROWARD BLVD FORT LAUDERDALE, FL 33312

SIGNATURE: JAMES LEWIS PD 04/19/2005