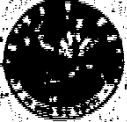


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morahan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P36639 (3)
1. Corporation Name AVIS SERVICE, INC.

**APPROVED
AND
FILED**
95 APR 18 PM 9:56

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 800 OLD COUNTRY ROAD GARDEN CITY NY 11530		2a. Mailing Address 800 OLD COUNTRY ROAD GARDEN CITY NY 11530		3. Date Incorporated or Qualified 12/09/1991	3a. Date of Last Report 05/01/1994
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 11-2811732		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Country	25. Country	29. Country		30. Country	
24. Country		25. Country		29. Country	
24. Country		25. Country		29. Country	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. City		84. Zip Code	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. City		84. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OP	1.1 TITLE	☐ Change ☐ Addition
NAME	SALERNO, F. ROBERT	1.2 NAME	
STREET ADDRESS	28 KATONAH WOODS RD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	KATONAH NY	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	BOVINO, CHARLES A.	2.2 NAME	
STREET ADDRESS	2 HIGH MEADOW CT.	2.3 STREET ADDRESS	
CITY - ST - ZIP	OLD BROOKVILLE NY	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	FEREZY, LAWRENCE	3.2 NAME	
STREET ADDRESS	64 CHESTNUT LANE	3.3 STREET ADDRESS	
CITY - ST - ZIP	WOODBURY NY	3.4 CITY - ST - ZIP	
TITLE	DEV	4.1 TITLE	☐ Change ☐ Addition
NAME	COLLINS, MICHAEL P.	4.2 NAME	
STREET ADDRESS	3 GREAT NECK CT.	4.3 STREET ADDRESS	
CITY - ST - ZIP	HUNTINGTON NY	4.4 CITY - ST - ZIP	
TITLE	VPS	5.1 TITLE	☐ Change ☐ Addition
NAME	LYNCH, JOHN J.	5.2 NAME	
STREET ADDRESS	1086 GRANT AVE.	5.3 STREET ADDRESS	
CITY - ST - ZIP	PELHAM MANOR NY	5.4 CITY - ST - ZIP	
TITLE	V P - TAX COUNSEL	6.1 TITLE	☐ Change ☐ Addition
NAME	STEVEN L. GREENBERGER	6.2 NAME	
STREET ADDRESS	162 HIGH POND DRIVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	JERICHO, NY 11753	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an addition.

SIGNATURE STEVEN L. GREENBERGER 3/28/95 516-222-3975
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR