2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000002754

Entity Name: ZIPPY RENT-A-CAR, INC.

FILED Jan 12, 2007 Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|--|---|----------------------------------|---|--|--|--|
| | HIGHWAY 19, TER, FL 33761 | | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 27365 U.S. HIGHWAY 19, NORTH CLEARWATER, FL 33761 | | | | | | |
| FEI Number: | 59-3162732 | FEI Number Applied For () FEI N | lumber Not Appl | icable () Certificate of Status Desired () | | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | | |
| CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US | | | | | | |
| 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 | | |
| Election Campaign Financing Trust Fund Contribution (). | | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | D () CASH, JANE W 11717 SPLIT TRI POTOMAN, MD | | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D () E JENKINS, GARR 373 CARRIAGE N ANNAPOLIS, MD | WAY PARK | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D ()E FITZGERALD, DO 9624 GLENCRES KENSINGTON, M | ST LANE | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | P () E SMITH, ROBERT 250 TURTLE CRI OLDSMAR, FL 3 | J EEK CIRCLE | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | AST () E BENTZON, MICH 11141 HURDLE H POTOMAC, MD | HILL DR | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | AST () E BARBER, JESSII 1701 PINEHURS DUNEDIN, FL 34 | T RD #19-H | Title: Name: Address: City-St-Zip: | AST (X) Change () Addition LEIS, MINDY D 8501 SHALLOW CREEK CT NEW PORT RICHEY, FL 34653 | | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBERT J SMITH P 01/12/2007