FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P92000003454 (5)

1. Corporation Name
MAROONE CAR AND TRUCK RENTAL COMPANY

Principal Place of Business	Mailing Address
8600 PINES BLVD PEMBROKE PINES FL 33024	8600 PINES BLVD PEMBROKE PINES FL 33024

3. Date Incorporated or Qualified: 11/10/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0371429 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business — 21, Suite, Apt #, etc. 22, City & State 23, Zip 24, Country 25
2a. Mailing Address — 26, Suite, Apt #, etc. 27, City & State 28, Zip 29, Country 30

9. Name and Address of Current Registered Agent

MAROONE, MICHAEL E
8600 PINES BLVD
PEMBROKE PINES FL 33024

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTDS	1 TITLE	PRESIDENT / SEC-TREASURER / DIRECTOR	☑ Change ☐ Addition
NAME	MAROONE, MICHAEL E	1 NAME		
STREET ADDRESS	8600 PINES BLVD	1 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL	1 CITY-ST-ZIP		
TITLE		2 TITLE	VICE PRESIDENT / CFO	☐ Change ☑ Addition
NAME		2 NAME	REESE, DONALD J.	
STREET ADDRESS		2 STREET ADDRESS	2082 EDGEWATER COURT	
CITY-ST-ZIP		2 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33332	
TITLE		3 TITLE	VICE-PRESIDENT	☐ Change ☑ Addition
NAME		3 NAME	HODGEN, BRADLEY N.	
STREET ADDRESS		3 STREET ADDRESS	729 CRYSTAL COURT	
CITY-ST-ZIP		3 CITY-ST-ZIP	FT. LAUDERDALE, FL 33326	
TITLE		4 TITLE	VICE PRESIDENT / GENMGR	☐ Change ☑ Addition
NAME		4 NAME	GRAHAM, KENNETH	
STREET ADDRESS		4 STREET ADDRESS	410 ALEXANDRIA CIRCLE	
CITY-ST-ZIP		4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33326	
TITLE		5 TITLE		☐ Change ☐ Addition
NAME		5 NAME		
STREET ADDRESS		5 STREET ADDRESS		
CITY-ST-ZIP		5 CITY-ST-ZIP		
TITLE		6 TITLE		☐ Change ☐ Addition
NAME		6 NAME		
STREET ADDRESS		6 STREET ADDRESS		
CITY-ST-ZIP		6 CITY-ST-ZIP		

14. I the undersigned hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE: [signature] VP-CFO 4/28/95 453-3310
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
DONALD J. REESE

0087321 CP