

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
May 07 1998 8:00am
Secretary of State

DOCUMENT # **P93000001524 (6)**

1. Corporation Name

MARLINS INTERNATIONAL AUTO RENTAL, INC.



Principal Place of Business

**3739 NW 25TH STREET
MIAMI FL 33142**

Mailing Address

**3739 NW 25TH STREET
MIAMI FL 33142**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/05/1993

4. FEI Number

65-0523211

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**REYNOSO, WALTER
2837 SW 27 AVENUE #107
COCONUT GROVE FL 33133**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD
REYNOSO, JORGE**
STREET ADDRESS **11600 N. BAYSHORE DR.**
CITY-ST-ZIP **N. MIAMI FL 33181**

TITLE ☐ DELETE

NAME **V
REYNOSO, EDITH**
STREET ADDRESS **11600 N. BAYSHORE DR.**
CITY-ST-ZIP **N. MIAMI FL 33181**

TITLE ☐ DELETE

NAME **T
REYNOSO, LUIS E.**
STREET ADDRESS **11600 N. BAYSHORE DR.**
CITY-ST-ZIP **N. MIAMI FL**

TITLE ☐ DELETE

NAME **S
REYNOSO, ALBERTO**
STREET ADDRESS **11600 N. BAYSHORE DR.**
CITY-ST-ZIP **N. MIAMI FL**

TITLE ☒ DELETE

NAME **CEO
AVEE, GERY CHIN**
STREET ADDRESS **10083 SW 180 CT**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0203758

CR2E034 (10/97)