

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 09, 2000 08:00 AM**
Secretary of State**DOCUMENT # P93000044580****1. Entity Name**

ALAMO RENT-A-CAR (CANADA), INC.

Principal Place of Business

110 SE SIXTH ST

FORT LAUDERDALE
33301

FL

US

Mailing Address

110 SE SIXTH ST

FORT LAUDERDALE
33301

US

FL

2. Principal Place of Business

200 S. ANDREWS AVENUE

3. Mailing Address

200 S. ANDREWS AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FORT LAUDERDALE

FL

City & State

FORT LAUDERDALE

FL

4. FEI Number

65-0568278

Applied For

Not Applicable

Zip
33301Country
USZip
33301Country
US**5. Certificate of Status Desired**☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.PLANTATION
33324

FL

US

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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**

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

(NOTE: Registered Agent signature required when reinstating)

03/09/2000

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)**☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution.**☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	AS	<input type="checkbox"/> Delete
NAME	SILLS HOWARD	
STREET ADDRESS	200 S. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	T	<input type="checkbox"/> Delete
NAME	HYLE KATHLEEN	
STREET ADDRESS	110 SE SIXTH ST	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	VAS	<input type="checkbox"/> Delete
NAME	HURST O	
STREET ADDRESS	110 S.E. 6TH ST.	
CITY-ST-ZIP	FORT LAUDERDALE FL	

TITLE	P	<input type="checkbox"/> Delete
NAME	BEARD KAREN	
STREET ADDRESS	200 S. ANDREWS AVE.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	

TITLE	DVS	<input type="checkbox"/> Delete
NAME	COLE JAMES O.	
STREET ADDRESS	110 SE SIXTH ST	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	DV	<input type="checkbox"/> Delete
NAME	HAWKINS THOMAS W	
STREET ADDRESS	110 SE SIXTH ST	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHEPPARD ELBERT L	
STREET ADDRESS	200 S. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	VPS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HURST MASON II	
STREET ADDRESS	200 S. ANDREWS AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOING MICHAEL	
STREET ADDRESS	200 S. ANDREWS AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HYLE KATHLEEN W	
STREET ADDRESS	200 S. ANDREWS AVE.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KARSNER MICHAEL S	
STREET ADDRESS	200 S. ANDREWS AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ HOWARD D	
STREET ADDRESS	200 S. ANDREWS AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**SIGNATURE:** O. Mason Hurst, II

VPS 03/09/2000

JASON A. SMITH, ASSISTANT TREASURER
200 S. ANDREWS AVENUE

FORT LAUDERDALE, FL 33301