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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996			ON OF CORPO		ON\$					
DOCUI 1. Corporation	MENT #	P9300007	3607	(2)							
RENTA	ls unlimited,	INC.									
Principal Place	of Business	Ma	ling Address						JAN ORANA ORANA IDAGI	, ilkie siili seiil is	
1491 S. CONGRESS AVENUE DELRAY BEACH FL			1491 S. CONGRESS AVENUE DELRAY BEACH FL 33445 US								
. <u>.</u>								 Date Incorporated or Qualified 10/25/1993 		of Last Report 20/1995	
	oce of Business On two b		Mailing Addres			Bluci	/	4. FEI Number		Applied	
Suite Apt. a	t. etc	7	Suite, Apt. #, 6	- 79 /V		DIVG		65-0445370		\$8.75 Addit	plicable
	1te 203	27	<u> </u>	etto 2	203			5. Certificate of Status Desired		Fee Require	
23 De/	Be	L . TZ 28	City & State	n Bo	4	FL		Election Campaign Financing Trust Fund Contribution		\$5.00 May Added to Fe	
24 334	144 25 Cour	151 29	3344	4 30	Country C	5A	,	This corporation has liability for Florida Statutes Yes		unders 199.00	32,
	9. Name and Add	ress of Current Regist	ered Agent					10. Name and Address of New	Registered A	jent	
LEADNE	R, RICHARD A				81	Name	Ca	s (P.Q. Box Mimber is Not Accepte	11.		
	CONGRESS AVEN	UE			82	Street Ac	idres:	s (P.O. Box Mimber is Not Accepta	ible) Ant	307	
	BEACH FL				83			19 00-1-1-4		-/	
	1				84	City /	,			85 Zip Code	
11. Pursuant t	o the provisions of Se	ctions 607.0502 and 607	7.1508, Florida	Statutes, the a	above-n	named core	oratio	on submits this statement for the n	FL.	3<42	od office
or register familiar wit	ed agent, or both, in the n, and allogo, the obli	he State of Florida. Such gations of, Section 607.0	change was au 0505, Florida St	ithorized by th atutes.	e corpo	oration's bo	oard (on submits this statement for the p of directors. I hereby accept the ap	pointment as the	gistered agent.	. I am
SIGNATURE /	X Value A	Wmen							2/7/	<i>U</i>	
12.	Strighter typed or printed nam	OFFICERS AND DIREC		(NOTE Registe		r signature requ	ared wh	her reinstating) ADDITIONS/CHANGES TO OF	FICERS AND F	IRECTORS IN	12
11'16	D		DELET	<u>t</u> 1	1 TITLE		Di	rector	Ø		Addition
NAME	DIAMOND, DOR			: 12	2 NAME	-	D_{rq}	amond, Dovothy	, ,		
STREET ADDRESS	1491 S. CONGR					ADDRESS .	519	11 CASA REAL DRIVE			
CHY ST Z# TILE	DELRAY BEACH	<u> </u>	DELETI		4 CITY - ST 1 TITLE	T-ZiP	De	sident But, Fr 3	3 48 9 <u> </u>	Z	432-
NAME	LEARNER, RICH	ARN			2 NAME	'	Le	anner Richard.	آلكار		Addition
STREET ADDRESS	1491 S CONGRI					ADDRESS	90	anner Richard.	ouny Roas	12+31	۰7
CITY - ST - ZIF	DELRAY BOH FL			24	4 CITY - SI			CARTON PL 331		•	·
TILLE			☐ DELETI	3	1 THILE			7		Change	Addition
NAME				3.2	? NAME						
STREET ADORESS						ADDRESS					
CHY ST ZIP			DELETE		CHTY-ST	I - ZIP				Change	ddition
NAME					NAME				L.,)	Oliange L. A	Julion
STHEET ADDRESS				ı.	STREET A	ADDRESS					
CHY-Si-7/P					CITY-SI	r - ZiP					
TOLLE			DELETE		1 TITLE					Change A	ddition
NAME Professional a					NAME						
STREET ADDRESS CITY ST ZIP					STREET						
THE			DELETE		<u>i City-Si</u> 1 Tille	- ZIP				Change A	ddition
NAM:					NAME	1			Ц	onange ∐ A/	201001
STREET ADDRESS		^			STREET	address					
1		1		I							

64 CITY-ST-ZIP

14. If do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated or 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 lips corporation or the receiver or kustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 an attachment with an juddress.

SIGNATURE:

TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/96 401-214-8002 Date Daytine Proce 9 CR2E034 (12/95)