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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000073607 (2)

RENTALS UNLIMITED, INC.

Principal Place of Business Mailing Address						10091 HAND BANK DD		
900 LINTON BLVD 203		900 LINTON BLVD 203			·			
DELRAY BEACH FL 33444		DELRAY BEACH FL 33444		DO NOT WRITE IN THIS SPACE				
US US					3. Date Incorporated or Qualified			
2 Principal C	Place of Business	On Mallian Address			10/25/1993			
	INCO OF DUSINESS	2a. Mailing Address			4. FEI Number	_ 	pplied For	
Suite, Apt. #, etc.		Suite Ant # etc	Sulte, Apt. #, etc.		65-0445370		ot Applicable	
22		27		5. Certificate of Status Desired		Additional equired		
City & State		City & State		6. Election Campaign Financing				
23		28	28		Trust Fund Contribution		May Be to Fees	
Zip	Country			,	8. This corporation owes or has paid the			
24	25 29 30		30		Personal Property Tax due June 30.			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent		
LE.	arner, richard a		81	Name	LEARNER RICHARD.	A.		
6053 OLD COURT RD				Street Ad	ddress (P.O. Box Number is Not Acceptable)		. 4 1/4	
APT 307					odress (P.O. Box Number is NonAcceptable)	'BR BH	0424	
BOCA RATON FL 33435					•			
			64	City	D DATE OF -	- 85 Zip	Code	
					BOCA RATON FLO F	<u>تر الله</u>	343/	
I O∏IÇE OF F	edistered agent, or both, in the State	e of Florida. Such change was a	uthorized by	the corpo	orporation submits this statement for the purpose	of changing it	is 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.	Signature, typod or printed name of registered agent and title if applicable. (NO OFFICERS AND DIRECTORS		E: Registered Agent signature requ				20 10 40	
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
NAME	LEARNER, RICHARD		1.2 NAME				Audilion	
STREET ADDRESS	6053 OLD COURT RD APT 3	0.7	1.3 STREET	*DODECC	498 NE SPANISH KIVER	BUO #89	4	
CITY-ST-ZIP	BOCA RATON FL	W.	1.4 CITY-ST-ZIP		698 NE SPANISH RIVER BOCA RATON, FL. 33431			
TITLE			2.1 TITLE	(- Zir	- Contract	Change	Addition	
NAME				!			7102151011	
STREET ADDRESS			2.3 STREET ADDRESS				}	
CITY-ST-ZIP			2. 4 CITY - S					
TITLE		DELETE	3.1 TITLE			Change	Addition	
NAME	3		3.2 NAME			_ •	_	
STREET ADDRESS	EET ADDRESS		3.3 STREET ADORESS					
CITY-ST-ZIP	CITY-ST-ZIP		3.4. CITY-ST-ZIP					
TITLE	DELETE		4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAME			•		
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP	····		5.4 CITY-ST	- ZIP				
TITLE		☐ DELET E	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP		4	6,4 CITY - ST	-ZIP				
14. Thereby c	ertify that the information supplied w on this annual report or supplement	vith this filling does not qualify for	the exempt	ion 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 integrity with an address.								
DIJUN 12 (TION TO IT CHAILDOO, OF OH AN THE	yriyneix wiiii an addresy:						