

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000081758 (3)

1. Corporation Name

AMERICAN CELLULAR RENTAL INC.



Principal Place of Business

700 SE 32 CT.
FORT LAUDERDALE FL 33316
US

Mailing Address

700 SE 32 CT
FORT LAUDERDALE FL 33316
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

POZZUOLI, EDWARD J
790 E. BROWARD BLVD
SUITE 200
FORT LAUDERDALE FL 33301

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 removing)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

CD

BERRY, CLIFFORD L
% 700 SE 32 CT.
FT. LAUDERDALE FL 33316

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

PD

RULIEN, DAVID R
% 700 SE 32 CT.
FT. LAUDERDALE FL 33316

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

BERRY, CLIFFORD L
% 700 SE 32 CT.
FT. LAUDERDALE FL 33316

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

THIXTON, WILLIAM
% 700 SE 32 CT.
FT. LAUDERDALE FL 33316

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DS

BURNETT, DAVID A
% 700 SE 32 CT.
FT. LAUDERDALE FL 33316

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

T/V.P.

DUKE, CLIFFORD F.
7000 SW 16TH STREET
PLANTATION FL 33317

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

~~Chief Financial Officer~~ ☒ Change ☐ Addition
Patterson, Gary
2 700 SE 32 COURT
FT. LAUDERDALE FL 33316

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do 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)(k), 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

3/18/96 954-764-3533

CR2E034 (12/95)