SECOND AMOUNT DUE	NOTICE: CORPORATION WILL B ON OR BEFORE 8/7/96: \$225 (IF DIS	E DISSOLVED ON O	R AFTER AU	GUST 7, 1996.		
PROFIT CORPORATION ANNUAL REPORT 1996		FLORI		ENT OF STATE fortham if State		
DOCUI	MENT # P9300	0082422	(5)			
BLOOM	IINGDALE RENTAL, INC.				4 100(100) 100 100 100(1 00(1) 00(1) 00(1)	III OSIOI IOIIA NIGIT DAUKA NIGIO HAKAMA
Principal Plac	e of Business	Mailing Addres	SS			
11104 W. BLO RIVERVIEW FL	OMINGDALE AVE. . 33569		11104 W. BLOOMINGDALE AVE. RIVERVIEW FL 33569			
2. Principal P	lace of Business	2a. Mailing Add	tress		3. Date Incorporated or Qualified 11/22/1993 4. FEI Number	3a. Date of Last Report 08/09/1995
21	H . I .	26			59-3212693	Applied for Not Applicable
Suite, Apt.	#, etc	Suite, Apt :	#, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State	· · · · · · · · · · · · · · · · · · ·		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zıp 24	Country 25	Zip 29	30	Country	8. This corporation has liability for Florida Statutes	intangible tax under si 199 032. Yes : No
9. Name and Address of Current Registered Agent GERENA, MONICA 742 CALIENTE DRIVE BRANDON FL 33511 10. Name and Address of New Registered Agent 81 Name C PLA MONICA 82 Street Address (PO. Box Number is Not Acceptable) 83 Cityl (L. M. Acceptable) 84 Cityl (L. M. Acceptable)						
SIGNATURE	Monica Signature typed or printed name of registered ag	ent and the it applicable	.0000, Florida	he above-named corporation		10-96
12. TITLE	OFFICERS AN	ND DIRECTORS	DÉLETÉ	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
NAME Street address	GERENA, KENNETH J 11104 W. BLOOMINGDALE A			1 2 NAME 1 3 STREET ADDRESS		
CiTY-ST-ZIP TITLE	RIVERVIEW FL VP		ELETE	1 4 CITY - ST - ZIP 2 1 TITLE		
NAME STREET ADDRESS	GERENA, MONICA 11104 W. BLOOMINGDALE A		ALL IL	2 2 NAME 2 3 STREET ADDRESS		Change Addition
CITY - ST - ZIP TITLE	RIVERVIEW FL		DELETE	2 4 CITY - ST - ZIP		
NAME STREET ADDRESS			SCLETE	3 2 NAME 3 3 STREET ADDRESS		Change Addition
CITY-ST-ZIP				3.4 CITY-ST-ZIP		
TITLE NAME			ELETE	4 1 TITLE 4 2 NAME		Change Addition
STREET ADDRESS				4 3 STREET ADDRESS		
CITY - ST - ZIP				4 4 CITY - ST - ZIP		
NAME		[_] [ELETE	5 1 TITLE 5 2 NAME		Change Addition
STREET ADDRESS				5 3 STREET ADDRESS		
CITY-ST-ZIP			5,576	5 4 CITY - ST - ZIP		
TITLE NAME		[_] [ELETE	6 1 TITLE 62 NAME		Change Addition
STREET ADDRESS				63 STREET ADDRESS		
CITY - ST - ZIP	v cortity that the information	d with this fire	mto d'	6 4 CITY - ST - ZIP		
made und		or of the corporation of	supplemental ir the receiver	annual report is true ai or trustee empowered	ly for the exemption stated in Section 1 nd accurate and that my signature shal to execute this report as required by C	
SIGNATURE: Monica Derena MONICA Getona 7-10-96 684-4070 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Control Officer Of Director Officer Of Director Officer Of						