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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED Jan 15 1998 8:00am Secretary of State

ANN	RPORATION IUAL REPORT 1998 IMENT # P9400	Sandra Secre	ARTMENT OF STATE B. Mortham tary of State CORPORATIONS	Jan 15 199 Secretary	98 8:00ar y of State
	RENTAL MANAGEMENT CO	, ,		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
`		28. Mailing Address 26. Suite. Apt. #, etc. 27. City & State 28. Zip	Country	03/21/1994 4. FF! Number 65-0474643 5. Certificate of Stalus Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes or has paid the	Applied For Not Applied For Not Applied I or Not Applied I or Fee Required \$5.00 May Bo Added to Fees Coureant year Internable
JOI 100 SU	25 9. Name and Address of Curre KS, DET H 389 NORTH KENDALL DR. ITE 310 AMI FL 33176	29 nt Registered Agent	81 Name 82 Street Add 83 84 City	Personal Property 1ax due June 30. 10. Name and Address of New Register ress (P.O. Box Number is Not Acceptable)	RE Zio Codo
11. Pursuant office or agent. I a SIGNATURE	Signature, typed or profed name of registered as	arions or, section 607.0505, F	utes, the above-named corporal authorized by the corporal lorida Statutes. H. Registered Agent signature required. 13.	poration submits this statement for the purpos tion's board of directors. I hereby accept the a	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	BROOKS, JONATHON N 6255 S.W. 126TH ST. MIAMI FL 33156 VD BROOKS, CHRISTINE C 6255 S.W. 126TH ST.	☐ DECLIE	1 2 NAME 1.3 STREET ADDRESS 1.4 C/TY-S1-7IP 2.1 TILLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33156 SD VAN RYN, STEVEN 24080 SW 157 AVENUE HOMESTEAD FL	Detere	2 . 4 CHY - ST - ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY - ST - ZIP		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		DETELE	4.1 TO LE 4. 2 NAME 4.3 STHELF ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAMI		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5 3 SI REEL ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE 6 2 NAME 6 3 STREEL ADDRESS		Change Addition
CITY-ST-ZIP			6.4 CITY - \$1 - ZIP		

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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

(355) 661-1699