

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 JUL 24 PM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000063732 (9)

1. Corporation Name

CHEEPER RENT-A-CAR, INC.

Principal Place of Business

1831 CASSAT AVE
JACKSONVILLE FL 32210

Mailing Address

1831 CASSAT AVE
JACKSONVILLE FL 32210

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/26/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

59-3030514

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. This corporation certifies that it is a corporation under the laws of the State of Florida.

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199(1)(2), Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

EVANS, DONALD L
1831 CASSAT AVE
JACKSONVILLE FL 32210

10. Name and Address of New Registered Agent

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

[Signature]

By the corporation, a duly authorized officer or director

(Date)

12. OFFICERS AND DIRECTORS

1. Name	D. Pres
2. Address	EVANS, DONALD L
3. Street Address	5561 HYDE PARK CIR
4. City & State	JACKSONVILLE FL 32210
5. Zip	
6. Name	
7. Address	
8. Street Address	
9. City & State	
10. Zip	
11. Name	
12. Address	
13. Street Address	
14. City & State	
15. Zip	
16. Name	
17. Address	
18. Street Address	
19. City & State	
20. Zip	

13. All other officers, directors, and persons having control or management of the corporation

1. Name		☐ Change ☐ Addition
2. Name		
3. Street Address		
4. City & State		
5. Name	D. V. Pres	☐ Change ☒ Addition
6. Name	EVANS, Deborah L	
7. Street Address	5561 Hyde Park Cir	
8. City & State	Jax FL 32210	
9. Name		☐ Change ☐ Addition
10. Name		
11. Street Address		
12. City & State		
13. Name		☐ Change ☐ Addition
14. Name		
15. Street Address		
16. City & State		
17. Name		☐ Change ☐ Addition
18. Name		
19. Street Address		
20. City & State		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110 (1)(7)(b), Florida Statutes. I further certify that the information submitted on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Page No. 8