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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

	1996	DIVISION OF (CORPORATIONS	l			
DOCUI 1. Corporation	MENT # P95000	0008944 (7)					
VAUGH	IN RENTALS, INC.						
Principal Place of Business Mailing Address				FORMER KAT (BIB) ONNA BRITA BEKAR DONA		ORREQUE ILL	
7402 N 56 ST		7402 N 56 ST					
SUITE 800-D TAMPA FL 33617		SUITE 800-D					
IMMENIE SO	017	TAMPA FL 33617				a. Date of Last R	eport
2. Principal Pla	ace of Business	2a. Mailing Address			01/30/1995 4. FEI Number	NIA , ,	Analina Fa-
1 365	O Lithia Pinecrest R	126 511 Wil	bur Stree	e+1	59-3292856		Applied For Not Applicable
Suite, Apt. i	i, etc.	Suite, Apt. #, etc.		~	5. Certificate of Status Desired	\$8.75	Additional
2 City & State	·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·	City & State				Fee	Required
3 Valr		28 Brandon	FL		6. Election Campaign Financing Trust Fund Contribution		May Be d to Fees
Zio	Country	Zip	Country		8. This corporation has liability for intan	gible tax under s	
4 3359	9. Name and Address of Current	29 33511	30 USA_		Florida Statutes Yes Name and Address of New Regis		· · · · · · · · · · · · · · · · · · ·
	5, Italia dia Addiasa ai Colletti	negistered Agent	81 Name				
STOUT,	CRISPIN		62 Street	Addross	nispin G. Stou (P.O. Box Number is Not Acceptable)	<u> </u>	
7402 N 5				511	Wilbur St.		
SUITE 80	00-D		83				
tampa f	EL 33617		84 City			85 Zi	p Code
44 []	Market 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		' '	Bra	ndon	FL 13	351(
or register	ed agent, or both, in the State of Florida	ino 607.1508, Florida Statutes i. Such change was authorize	s, the above-hamed co d by the corporation's	corporation board of	n submits this statement for the purpose directors. I hereby accept the appointn	e of changing its r nent as registered	egistered office Lagent. Lam
	n, and accept the obligations of, Section	n 607.0505, Florida Statutes.					_
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title Lappicable (NOTI	Registered Agent signature r	required whe	n reinslating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER		PRS IN 12
INLE	PD	☐ DELETE	1. 1 TITLE	Vic	e President	Change	☐ Addition
NAME CALLET ADDODGE	STOUT, CRISPIN		1.2 NAME	511	spin G. Stout Wilbur St.		
STHEET ADDRESS DITY-ST-ZIP	7402 N 56 ST SUITE 800-D TAMPA FL 33617		1.3 STREET ADDRESS		indon, FL 33511		
)I'LF	VD	DELETE	1.4 CITY - ST - ZIP 2 1 TITLE		sident	Change	☐ Addition
NAME	ALI, VAUGHN	<u></u>	2.2 NAME		ghn ali o Lithia Pinecrest 1		
STREET ADDRESS	7402 N 56 ST SUITE 800-D		2 3 STREET ADDRESS	365	d Lithia Pinecrest 1	2d.	
CHY-ST ZIP	TAMPA FL 33617		24 CITY - ST - ZIP	Val	rico, FL 33594		
TillE	ST	☐ DELETE	3 1 TITLE	Secr	etary / Treasurer	Change	■ Addition
NAME STREET ADDRESS	GLEIN, MELISSA		3 2 NAME		lissa Glein		
STREET ADDRESS	7402 N 56 ST SUITE 800-D TAMPA FL 33617		3.3 STREET ADDRESS		wilbur st.		
::::::::::::::::::::::::::::::::::::::	TAME A LE SOUT	DELETE	3.4 CHY-ST-ZIP 4.1 TITLE	1314	ndon, Fl 33511	Change	Addition
NAME		<u></u> ,	4 2 NAME				
STREET ADDRESS			4.3 STHEET ADDRESS				
COTY-ST-ZOF			4.4 CITY - ST - ZIP				
IIILE		☐ DELETE	5 1 TITLE			☐ Change	☐ Addition
NAM(5 2 NAME				
STIFEET ADDRESS CITY+ST-ZIP			5 3 STREET ADDRESS				
Bittial-zir BitE		DELETE	6 1 TITLE	 		Change	Addition
NAMÉ		•	6 2 NAME			F-1 4.10.180	
STHEET ADDRESS			6 3 STREET ADDRESS				
DITY ST-ZP			6 4 CITY - ST - ZIP	<u> </u>			
 I do hereby certify that 	certify that the information supplied wi the information indicated on this annua	th this filing is voluntarily furnis I report or supplemental annua	hed and does not qualified and ac	alify for th	e exemption stated in Section 119.07(3) nd that my signature shall have the same	(k), Florida Statut	es. I further made under

oath; that I am an officer or director of the corporation or the receiver or frustee 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: Malessa R. G. Le Melissa R. Glein 2 14196 813-651-3398

SIGNING OFFICER OR DIRECTOR