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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000036337 (0)

THE RENTAL COMPANY, INC.

Principal Place of Business Mailing Address						100/100% 110 1040 0414 04111 08417 0	BRIT OF THE	i u il eo iik u a kiki	.	
			: TREE ROAD FL 34293-1661							
						 Date Incorporated or Qualifie 05/08/1995 	l l	oate of Last R 01/1996	eport	
 -	Place of Business	2a. Mailing Addi	ess			4. FEI Number		Ap	oplied For	
21		26				65-0090296			ot Applicable	
Sulte, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A			
City & Stat	l e	City & State				6. Election Campaign Financing		\$5.00	May Be	
23	Country	28		(1. Ta)		Trust Fund Contribution		Added t		
Zip	Country	Zip	├ ─¬	λountry	<i>f</i>	8. This corporation has liability f			199.032,	
24	25 9. Name and Address of Curr	29	30			Florida Statutes 10. Name and Address of New	Yes			
		ent neglistered Agent		81	Name		negistered	Адепі		
	KLEY, ELAINE R			L						
	TAMPA AVE.			82	Street	Address (P.O. Box Number is Not Accep	table)			
VEN	ICE FL 34285			83		-				
				00						
				84	City		FL	85 Zip (Code	
11. Pursuant office or a	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob-	502 and 607.1508, Flori ate of Florida, Such char ligations of Section 607	ia Statutes, the ge was authori 0505, Florida S	abov red by	! e-named y the cor	corporation submits this statement for th poration's board of directors. I hereby ac			s registered registered	
SIGNATURE			0000,1101100	, carono						
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOT): Regist	pred Ag	nt signature	e required when reinstating)	DATE			
12.		AND DIRECTORS	1	3.		ADDITIONS/CHANGES TO OF	FICERS AN	DIRECTOR	S IN 12	
TITLE	DP	DI DI	LETE 1.	1 TITLE				Change	Addition	
NAME	BRINKLEY, ELAINE R		1.	2 NAME						
STREET ADDRESS	340 PINE TREE ROAD		1.	3 STREET	ADDRESS					
CITY-ST-ZIP	VENICE FL 34293			4 CHY-S	T - ZIP					
TITLE		D€	TETE 5	1 THLE		•		Change	Addition	
NAME			2	2 NAME						
STREET ADDRESS			2	3 STREET	ADDRESS					
CITY-ST-ZIP				M CITY-	S1 - ZIP					
TITLE		☐ DE	· ·	1 TITLE				Change	Addition	
NAME				2 NAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		□ DE		4. CITY - :	ST - 71P			Channa	T Addition	
				1 TITLE				Change	L Addition	
NAME OTDEET ADDRESS				P NAME	IDDOCCO					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		□ DE		<u>4 CITY - S</u> 1 TITLE	II - ZIP			☐ Change	Addition	
NAME								☐ Change	F"1 Wonting	
STREET ADDRESS				2 NAME 5 espect	ADADCCC					
					ADDRESS					
CITY-ST-ZIP TITLE		DI DI		<u>CITY - S</u> 1 TITLE	1-211			Change	Addition	
NAME		ب ا		NAME					I MODITION	
STREET ADDRESS	e e				ADDRESS					
CITY-ST-ZIP				S SIKEET						
Anii Ai. Fil			■ U.*		1.411	t contract to the contract to				

14. I do 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.

11/20/00 21/11/21/21

FILED

May 02 1997 8:00am

Secretary of State