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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P95000072890 (3) DOCUMENT #

BOAT TRAILER RENTALS OF FORT LAUDERDALE, INC.

Principal Place of Business Mailing Address 801 NE 42ND STREET 801 NE 42ND STREET OAKLAND PARK FL 33334 OAKLAND PARK FL 33334 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/19/1995 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For Not Applicable 65-0613261 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 LOZITO. DENNIS L 801 NE 42ND STREET 82 Street Address (P.O. Box Number is Not Acceptable) OAKLAND PARK FL 33334 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Addition Change TITLE 1.5 TITLE LOZITO, DENNIS L. NAME 1.2 NAME **801 NE 42ND ST** STREET ADDRESS 1.3 STREET ADDRESS OAKLAND PARK FL CITY-ST-ZIP 1.4 CITY-ST-ZIP VSD DELETE Change Addition TITLE 21 HILE ŁOZITO, KIMBERLEY J. NAME 2.2 NAME 801 NE 42ND ST STREET ADDRESS 2.3 STREET ADDRESS **OAKLAND PARK FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

14. 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 oath; 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.

CITY-ST-ZIP

FILED

Apr 15 1998 8:00am

Secretary of State