

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000092123 (5)
1. Corporation Name

TRAILER RENTALS OF AMERICA, INCORPORATED



Principal Place of Business

Mailing Address

1780 SE 4TH STREET
POMPANO BEACH FL 33060

1780 SE 4TH STREET
POMPANO BEACH FL 33060

3. Date Incorporated or Qualified
12/04/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1786 S.E. 4TH STREET

26 1786 S.E. 4TH STREET

4. FEI Number
65-0648802

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE # 1

27 SUITE # 1

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 POMPANO BEACH, FL.

28 POMPANO BEACH, FL.

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 33060

25 ~~POMPANO~~ U.S.A.

29 33060

30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOTT, RICHARD
1780 SE 4TH STREET
POMPANO BEACH FL 33060

81 Name LOTT, RICHARD

82 Street Address (P.O. Box Number is Not Acceptable)

1786 S.E. 4TH STREET

83 SUITE # 1

84 City POMPANO BEACH

85 Zip Code FL 33060

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]
Signature typed or printed name of registered agent and title if applicable

(#011) Registered Agent signature required when re-registering

8/4/1996
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD
NAME LOTT, RICHARD
STREET ADDRESS C/O 1780 SE 4TH STREET
CITY-ST-ZIP POMPANO BEACH FL 33060 ☐ DELETE

1.1 TITLE PSTD
1.2 NAME LOTT, RICHARD ☒ Change ☐ Addition
1.3 STREET ADDRESS C/O 1786 SE 4TH STREET
1.4 CITY-ST-ZIP POMPANO BEACH, FL 33060

TITLE VD
NAME LOTT, DAVID
STREET ADDRESS C/O 1780 SE 4TH STREET
CITY-ST-ZIP POMPANO BEACH FL 33060 ☐ DELETE

2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME LOTT, DAVID
2.3 STREET ADDRESS C/O 1786 SE 4TH ST.
2.4 CITY-ST-ZIP POMPANO BEACH, FL 33060

TITLE ~~VD~~
NAME ~~LOTT, DAVID~~
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature] (RICHARD LOTT)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/96

954-784-8421

CR2E034 (3/96)