

2004 AR

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PS1 82

CORPORATION



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL 21 AM 8:00

DOCUMENT # P96000018245

1. Corporation Name **P. J. Auto Rentals, Inc**

2. Principal Office Address **4387 NW 7TH ST**

Suite, Apt. #, etc.

3. Mailing Office Address **3181 SW 130 Ave**

Suite, Apt. #, etc.

City & State **MIAMI FLA**

Zip **33126** Country **USA**

City & State **MIAMI FLORIDA**

Zip **33175** Country **USA**

4. Date Incorporated or Qualified To Do Business in Florida **2/26/1996**
5. FEI Number **65-0645441**
6. CERTIFICATE OF STATUS DESIRED ☐ **3875. Additional fees required for a Certificate of Status**

MRS

7. Name and Address of Current Registered Agent

Name **PEDRO A. JAIMEZ**
Street Address (P.O. Box Number is Not Acceptable) **3181 SW 130 AVE**
Suite, Apt. #, Etc.
City **MIAMI**

State **FL** Zip Code **33175**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent **[Signature]** Date **7/01/04**
REGISTERED AGENT MUST SIGN

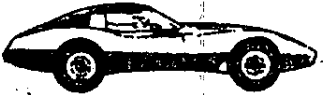
9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres/	PEDRO A. JAIMEZ	3181 S.W. 130 AVE	MIA, FLA 33126
Sec.	PEDRO A JAIMEZ	3181 SW 130 AVE	MIA FLA 33126

800038645288
07/02/04--01056--004 **150.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE **[Signature]** **PEDRO A. JAIMEZ** 7/1/04 (305) 461-5205
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone



P. J. MOTORS, INC.
P. J. AUTO RENTALS, INC.

4387 N. W. 7 Street
Miami, Florida 33126

PS 282
Phone: (305) 461-5205
Fax: (305) 461-3066

July 1, 2004

Florida Department of State
Secretary of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. BOX 6327
Tallahassee, FL 32314-6327

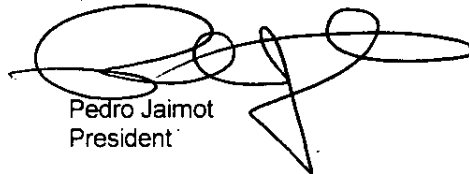
Dear Sir:

As per our telephone conversation we are enclosing you a check for the amount of \$150.00 dollars.

Please be advised as mentioned on the phone, we have renewed our corporation every year on the year, but this particular year we did not receive the annual report. Therefore we are pleading you to absolve the penalty charges.

Please if you have any questions do not hesitate to contact us.

Sincerely,



Pedro Jaimot
President