Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90040 008 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000051480**

1. Corporation Name

HORIZON RENTAL PROPERTIES, INC.

| Principal Place of Business Mailing Address | | | | | | | #1181 11811 3 1881 1 | 8111 8011 1001 |
|---|--|--|--|----------------------------|-------------------------------------|--|---------------------------------|----------------------|
| 1021 N. DIXIE HWY HALLANDALE FL 33009 US | | 1021 N. DIXIE HWY HALLANDALE FL 33009 US | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | 3. Date Incorporated or Qualifed 06/14/1996 | | |
| Principal Place of Business 2a. Mailing Address | | | | | | 4. FEI Number | App | lied For |
| 21 26 | | | | | | APPLIED FOR | Not | Applicable |
| Suite, Apt. | | Suite, Apt. #, etc. | · · · | | | 5. Certificate of Status Desired | \$8.75 A | |
| 22 | | 27 | , and the second of the second | | (at connected to every popularing 1 | Fee Rec | quired- | |
| City & Stat | e | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 t Added to | |
| Zîp | Country | Zip | Cou | untry | | 8. This corporation owes the current year Int | angible | |
| 24 | 25 | 29 | 0 | | | Personal Property Tax. | | □No |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New Registered | Agent | |
| NATARUS, LOUIS | | | | | ame | ess (P.O. Box Number is Not Acceptable) | | |
| 1021 N. DIXIE HWY | | | | 02 3 | lieel Addie | ess (F.O. Box Number is Not Acceptable) | | |
| HALLANDALE FL 33009 | | | | 83 | _ | | | |
| | | | | | | | as Zin C | |
| | | | | 84 C | ity | FL | 85 Zip C | 008 |
| l office or n | to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation | if Florida. Such change was auth | horize | d by the | imed corpo corporation | oration submits this statement for the purpose of n's board of directors. I hereby accept the appoi | changing its r ntment as reg | egistered istered |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered | | | | | perluper enutred | | | |
| 12. | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | | |
| TITLE | DP | ☐ DELETE | 1.1 TI | TLE. | | | ☐ Change | ☐ Addition |
| NAME | NATARUS, ROBERT A | | 1.2 N | AME | | | | |
| STREET ADDRESS | | | 1.3 S | TREET ADD | RESS | | | |
| CITY-ST-ZIP | | | 1.4 C | ITY-ST-ZIF | | | | |
| TITLE | DST DELETE - 21 | | 2.1 T | TLE | | • | Change | ☐ Addition |
| NAME | 14(1) 11(0) | | 2.2 N | AME | ì | | | |
| STREET ADDRESS | 1021 111 2112 | | 2.3 STREET ADDRESS | | RESS | | | |
| CITY-ST-ZIP | | | 2.40 | 2. 4 CITY-ST-ZIP | | | | |
| TITLE | DELETE | | 3.1 T | 3.1 TITLE | | والمناوية والمالية والمتحجج للمجال المحا | . Change | Addition |
| NAME | | | 3.2 N | AME | | | | |
| STREET ADDRESS | | | 3.3 S | TREET ADD | RESS | | | |
| CITY-ST-ZIP | | | 3.4. 0 | CITY-ST-Zi | <u> </u> | | | |
| TITLE | | ☐ DELETE | 4.1 TI | MLE | 1 | | Change | Addition |
| NAME | | • | 4.21 | NAME | | | | |
| STREET ADDRESS | ٠ | | 4.3 \$ | TREET ADD | RESS | | | |
| CITY-ST-ZIP | <u> </u> | | 4.4 C | ITY-ST-ZIF | , | | | |

CITY-ST-ZIP 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, with all other like empowered.

51 TIDE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

TITLE

TITLE

NAME

☐ DELETE

☐ DELETE

☐ Change

☐ Change

☐ Addition

Addition