2005 FOR PROFIT CORPORATION

Apr 25, 2005 08:00 AM ANNUAL REPORT **Secretary of State DOCUMENT # P96000092040** MIAMI RENT-A-CAR, INC. Principal Place of Business Mailing Address 830 N.E. 79 STREET 830 N.E. 79 STREET MIAMI, FL 33138 MIAMI, FL 33138 03172005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0714438 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARAU, MIGUEL JR. DO NOT WRITE 15220 FINTRY PLACE MIAMI LAKES, FL 33016 IN THIS SPACE 6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 U00000327725 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/25/05-80040-017 150.00 OFFICERS AND DIRECTORS 10. TITLE NAME GARAU, MIGUEL JR. 15220 FINTRY PLACE STREET ADDRESS CATY-ST-ZIP MIAMI LAKES, FL 33016 TITLE NAME STREET ADDRESS CITY -ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other/like empowered,

SIGNATURE:

NAME STREET ADDRESS

UHE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-05

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FILED

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