## 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

## P97000030364 (8) DOCUMENT #

TEAM RENTERIA, INC.

## FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mail-no Address 13535 FEATHER SOUND DR., STE. 405 13535 FEATHER SOUND DR., STE. 405 CLEARWATER FL 34622 CLEARWATER FL 34622 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/03/1997 2. Principal Place of Busines 2a. Mailing Address Applied For 13907 N Dale Mebry Huy 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 014206 5. Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible USA Yes ☐ No 30 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent GRESHAM, GREGORY L 918A DREW ST. Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34615 B3** 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: typed or printed name of registered agent and title diapplication (NOTE: Registered Agent signature recluired when reinstating) OF LICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE \_\_ Change ☐ Addition TITLE D 1.1 TITLE NAME LANE, JEFFREY G 1.2 NAME 13535 FEATHER SOUND DR., STE. 405 STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34622** 1.4 CiTY-S1-ZiP CITY-ST-ZIP DELETE \_\_\_ Addition Change TITLE 21 THLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-\$1-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change ■ Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP DELETE Addition TITI F Change 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP ☐ Change DELETE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CHY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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.

4-30-951