## 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

**DOCUMENT** # 1. Corporation Name P97000038442 (4)

RCL EQUIPMENT RENTAL, INC.

## **FILED** May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
17647 SOUTHWEST 146 COURT 17647 SOUTHWEST 146 COURT MIAMI FL 33177 MIAMI FL 33177						
MINIMI LE 2011.						DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified	
					04/30/1997	
2. Principal Place of Business 28. Mailing Address						4. FEI Number Applied For
21 1764	7_S.W146_Court_	26				65-0748990 Not Applicable
Suite, Apt.	·	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22 Miam City & State	i_Fla	City & State				Fee Required
23 Miami Fla. 28			Nal <del>o</del>			6. Election Campaign Financing \$5.00 May Be
Zip Zip	Country	Zip Cour			· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution Added to Fees
<del></del>	<b>├</b> ¬¬ ´	29	30	y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
941 331	331 77   25   29   30     9. Name and Address of Current Registered Agent			]		10. Name and Address of New Registered Agent
AMERILAWYER CHARTERED					Name	
343 ALMERIA AVENUE					<del>-</del>	
CORAL GABLES FL 33134				82	Street A	Address (P.O. Box Number is Not Acceptable)
COMAL GABLES PL 33134				83		
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-n					-named	
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, or mainlier with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling)  DATE						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 T	TLE		Change Addition
NAME	MIRANDA, ROBERTO		1.2 N	AME		
STREET ADDRESS	REET ADDRESS 17647 SOUTHWEST 146 COURT			TREET .	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33177		1.4 C	ITY-S1	1-21P	
TITLE	ST	☐ DELETE	2.1 Ti	TLE		Change Addition
NAME	MIRANDA, LOURDES J		2.2 N	AME		
STREET ADDRESS	17647 SOUTHWEST 146 COU	RT	2.3 S	TREET	ADORESS	
CITY-ST-ZIP	MIAMI FL 33177		2.40	ITY-\$	T-ZIP	
TITLE		☐ DĒLETE	3.1 TI	TLE		Change Addition
NAME			3.2 N	AME	ļ	
STREET ADDRESS			3.3 \$	TREET .	ADORESS	
CITY-ST-ZIP				IIY-S	T-ZiP	
TALE		DELETE	4.1 TI	TLE		☐ Change ☐ Addition
NAME			4.2 N	IAME	- 1	
STREET ADDRESS			4.3 S1	(REE)	ADDRESS	
CITY-ST-ZIP	<del></del>	- December		TY-ST	-ZIP	
TITLE		DELETE	5111		- 1	☐ Change ☐ Addition ↓
NAME			52 N		ŀ	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		Printer	_	TY-ST	- ZIP	
TITLE		DELETE	6.1 Ti			Change Addition
NAME			6.2 N/			
STREET ADDRESS			6.3 ST	REET /	ADDRESS	
CITY-ST-ZIP	adde that the information P. 199	ALC: 470		1Y - ST		11. 0
14. I hereby c	ertify that the information supplied with	i this filing does not qualify.	for the exc	amot	ion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 1.19.07(5)(f), Florida Statutes. Torrier certify that the informatic 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.