## 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 # P97000100408 (8)

RENTAL DEPO OF SOUTH FLORIDA INC.

## **FILED** Apr 17 1998 8:00am Secretary of State



Principal Plac	e of Business	Maile	Mailing Address					•••••		
900 N.E. 17T			900 N.E. 17TH TERRACE							
FORT LAUDERDALE FL 33304		FORT LAUDERDALE FL 33304					DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified		SPACE	
							11/25/1997	,		
2. Principal P	lace of Business	28. 1	Mailing Address	··-·			4. FEI Number			Applied For
21	ass of positions	26					65-080572	9		Not Applicable
Suite, Apl.	#, etc.	Suite, Apt. #, etc.								Additional
22		27	, ,				5. Certificate of Status Desired			Required
City & Stat	6		ity & State				6. Election Campaign Financing		\$5.0	O May Be
23		28					Trust Fund Contribution			d to Fees
Zip	Country	7	ip	Coun	try		8. This corporation owes or has	paid the cu	urrent year	Intangible
24	25	29		30			Personal Property Tax due Jui		Yes	□ No
	9. Name and Address of Curre		red Agent				10. Name and Address of New F	Registered	Agent	
	<mark>iepa</mark> rd, leskar & levine, p.a	l.			31	Name				
	9 <b>S</b> OUTHEAST 7TH ST.		82			Street Ad	Idress (P.O. Box Number is Not Accept	able)		
ļ FO	ORT LAUDERDALE FL 33301				ightharpoonup					
				1	B3					
				la la	B4	City			85 Zi	p Code
					$\perp$	•		<u>Fl</u>	_ 1 1	
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607 e of Florida	.1508, Florida Statut Such change was a	es, the abo authorized	ove hv	<ul> <li>named co</li> <li>the corpor</li> </ul>	orporation submits this statement for the ration's board of directors. I hereby acc	purpose o	of changing	) its registered as registered
agent I a	m familiar with, and accept the oblig	ations of, 5	Section 607. <b>0505</b> , Fig	orida Statu	tes.			op:e ep	Pominion	20 10g/210/04
SIGNATURE										
10	Signature, typed or printed name of registered ap OFFICERS AN			f.: Registered	Agen	it signature rec	quired when reinstating)  ADDITIONS/CHANGES TO OFF	DATE OF AN	D DIDCOTO	DDC (N. 10
12.	D OFFICENS AN	DOMEGI	DELETE	1.1 TITL	F		ADDITIONS/CHANGES TO OFF	ICERS AIV	Change	
NAME	COOPER, E. GERALD			1,2 NAN						,
STREET ADDRESS	900 N.E. 17TH TERRACE					ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 3330	)4		1.4 City						
TITLE			DELETE	2.1 3tTL		-ZIF		· · · · ·	Change	Addition
NAME				2.2 NAN						
STREET ADDRESS				- 1		ADDRESS				
CITY-ST-ZIP				2. 4 CIT						
TITLE			DELETE	3.1 TITL					Change	Addition
NAME				3.2 NAN	AE.					
STREET ADDRESS				3.3 STR	EET A	ADDRESS				
CITY-ST-ZIP				3.4. CIT						
TITLE			DELETE	4.1 TITC					Change	Addition
NAME				4. 2 NA	WE					
STREET ADDRESS				4.3 STR	EET A	ADDRESS				
CITY-\$T-ZIP				4.4 CITY	<u>/-</u> \$T	- ZIP				
TITLE			DELETE	5.1 TITL	E				Change	Addition
NAME				5.2 NAN	AE.					•
STREET ADDRESS				5.3 STR	EET #	ADDRESS				
CHTY-ST-ZIP				5.4 CITY	<u> </u>	- ZIP				
TITLE			DELETE	6.1 TITL	E				Change	Addition
NAME				62 NAN	<b>A</b> E					
STREET ADDRESS				63 STA	EET A	ADDRESS	•			
Offix et. 780				6.4 City	/ PT	710				

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 all achiment with an address.

4-12-98 954-412-4224