

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON 03/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Mar 04, 1999 8:00 am**  
**Secretary of State**

03-04-1999 90222 016 \*\*\*150.00  
 08-16-1999 90004 026 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P98000026959**

1. Corporation Name  
**BUDGET MOBILE, INC.**



Principal Place of Business 2215 N WASHINGTON BLVD SARASOTA FL 34234	Mailing Address 2215 N WASHINGTON BLVD SARASOTA FL 34234
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/23/1998</b>	
21. 2243 N. Washington	22. Sarasota FL	26. 2243 N. Washington	27. Sarasota FL	4. FEI Number 650824304	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$8.75 Additional Fee Required	
7. This corporation owes the current year Intangible Personal Property. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes the current year Intangible Personal Property. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

**UCC FILING & SEARCH SERVICES, INC.**  
 526 EAST PARK AVE.  
 STE. 200  
 TALLAHASSEE FL 32302

10. Name and Address of New Registered Agent

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			FL	

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	HAMMOUD, WISSAM	
STREET ADDRESS	1993 COUNTRY MEADOWS WAY	
CITY-ST-ZIP	SARASOTA FL 34235	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 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.

SIGNATURE: \_\_\_\_\_ DATE: 7-18-99 (941) 906-8888  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

0103175

CR2E034 (5/99)

PA80000026959  
605993-90004-26

**Budget Mobile, Inc.**  
**2243 N. Washington Blvd.**  
**Sarasota, FL 34234**  
**(941)906-8888**

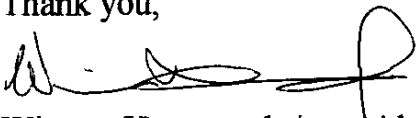
7-18-1999

Division Of Corporations  
Annual Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

To whom it may concern,

As you requested, enclosed is the only Annual Report Packet I received with a payment of \$150.00. I never received any other packet!!

Thank you,



Wissam Hammoud, / president