SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 30, 1999 8:00 am Secretary of State

07-30-1999 90010 026 ***150.00

DOCUMENT # 1. Corporation Name	P98000072434

KIST RENTALS, INC.

		1		
Principal Place of Business	Mailing Address		7	III Diane tiisi aibi saet
435 S. Ridgewood ave. D aytona Beach FL 32 114	435 S. RIDGEWOOD AVE. DAYTONA BEACH FL 32114		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified 08/17/1998	
2. Principal Place of Business	2a. Mailing Address	0.1	4. FEI Number	Applied For
21 1515 Der bushire Rd.	26 1515 Derhan	weld.	59-3526656	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	-	5 Contificate of Status Desired 58	3.75 Additional Fee Required
City & State	City & State			5.00 May Be added to Fees
Zip 33 N 25 Volusia	29 3 - \ \ \ \ 30 \ \	Volusia.	This corporation owes the current year Intangible Personal Property. Yes	i No
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agen	t
BELUS, ALLEN 435 S. RIDGEWOOD AVE.		81 Name		
		82 Street Address (P.O. Box Number is Not Acceptable)		
DAYTONA BEACH FL 32114		83		
		84 City	FI 85	Zip Code

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		41075	Registered Agent signature re-	puired when reinstating) DATE
12.	Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Pres, Tres.	DELETE	1.1 TITLE	Change Addition
NAME			1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP	Holly Hill, Fl 321	117	1.4 CITY-ST-ZIP	
TITLE	Y. Pres, Sec.	DELETE	2.1 TITLE	Change Addition
NAME	Sharon Kist		2.2 NAME	
STREET ADDRESS	1515 Derhoshine kd.	."	2.3 STREET ADDRESS	
CITY-ST-ZIP	Helly Hill Fl. 3211	J	2.4 CITY-ST-ZIP	
TITLE	0	DELETE	3.1 TITLE	Change Addition
NAME	•		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME	100 CMG 1500(400) 11 11 11 11 11 11 11 11 11 11 11 11 11		6.2 NAME	
STREET ADDRESS	PAT REGIONAL SA SA INTERIORAÇÃO AS		6.3 STREET ADDRESS	
CITY-ST-ZIP -	The state of the s		6.4 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.

Da8070072434 7/20/2 599014-90010-26= I am sending the 150.00, I never received the 1st one, had never seen on before just started my conspection. This will not pappen again now that I know about this fam. It might have been pert to the address on the fam existed of mene me me albert shaw addies 1515 Derbysteie Rd Holly Hiel, 41 32117

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