

## 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 26, 2002 8:00 am**  
**Secretary of State**

03-26-2002 90054 016 \*\*\*150.00

DOCUMENT # P99000054374

1. Entity Name

AIRLINES RENTAL CAR, CORP.

Principal Place of Business

4315 N.W. 7TH STREET  
 SUITE 51  
 MIAMI FL 33126

Mailing Address

4315 N.W. 7TH STREET  
 SUITE 51  
 MIAMI FL 33126

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-0928524

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZAPATA, MARTHA E  
 4315 N.W. 7TH STREET  
 SUITE 51  
 MIAMI FL 33126

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back)



**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME

PD  
 CORTES, JORGE R  
 4315 N.W. 7TH STREET  
 MIAMI FL 33126

☐ DeleteSTREET ADDRESS  
CITY-ST-ZIPTITLE  
NAMESTREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAME

VD  
 ZAPATA, MARTHA E  
 4315 N.W. 7TH STREET  
 MIAMI FL 33126

☐ DeleteSTREET ADDRESS  
CITY-ST-ZIPTITLE  
NAMESTREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAMESTREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAMESTREET ADDRESS  
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CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAMESTREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAMESTREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jorge R. Cortes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE R. CORTES

PRESIDENT

01/09/02 (305) 461-1244

Date

Daytime Phone #

CR2E034 (9/01)