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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$23605

(6)

RENTZER, INC.

Principal Place of Business

1803 NW BI WAY PLANTATION FL 33322 Mailing Address

1603 NW 81 WAY PLANTATION FL 33322-5420

FILED May 05 1997 8:00am Secretary of State

| | | | | | | | | Date of Last Report 08/27/1996 | | | | | |
|--|---|--------------------------------|---|---|--------------------------------|--|---------------------------------------|------------------------------------|--|--|---------------------------------|------------------------|------------------------------------|
| 2. Principal Pl | | | | , | <u></u> | Majling Addre | | | | 4FEI Number | | Ť. | Applied For |
| 21 /603 | | 81 | way | | 26 | 1603 NO | | W | ay | 65-0241711 | | | Not Applicable |
| Sulte, Apt. : | | | | | 27 | Suite, Apt. #, i <u></u> | etc. | | | 5. Certificate of Status Desired | | | 5 Additional Required |
| City & State 23 PLANTATION FL | | | | 7 | City & State 28 PLANTATION FL | | | v | FL | Election Campaign Financing Trust Fund Contribution | Ø \$5.00 May Be ☐ Added to Fees | | |
| Zip 3332 | 2.0 | С | Country | | | Zip | | Country | 2.0.21 | 8. This corporation has liability for | | | ers. 199.032, |
| 24 2554 | | | BROWA | | 29 | 33322 | 30 | 15/4 | ward | | Yes [| | |
| | 9, Name | | Address of | Current F | legis | tered Agent | | | T | 10. Name and Address of New Re | ∍gistered / | Agent | |
| 1603 NW 81ST WAY PLANTATION FL 33322 | | | | | | | 81 | Street Ac | ddress (P.O. Box Number is Not Accepta | ble) | , | | |
| | | | | | | | | 83 | i | | | | |
| | | | | | | | | 84 | | | FL | Jl. | Zip Code |
| office or re | egistered ag | ent, o | ir both, in th | ie State of | Floris | 07.1508, Florid da. Such chang f, Section 607.0 | ge was aut | horized b | y the corpo | corporation submits this statement for the oration's board of directors. I hereby acce | purpose of pt the app | changir ointment | ig its registered as registered |
| SIGNATURE | Signature, lyped | d or print | ed name of regi | sternd agent r | nd litte | if applicable | (NOTE F | logistered Ag | ent signature re | equired when reinstating) | DATE | | |
| 12. | | | OFFICE | RS AND I |)IRE | CTORS | | 13. | | ADDITIONS/CHANGES TO OFFI | CERS AND | DIRECT | ORS IN 12 |
| TITLE | P | | | | | DEI | .E1E | 1.1 30TLE | | | | Chan | ge [] Addition |
| NAME) | RENTZE | | | | | | | 1.2 NAME | Ì | | | | |
| STREET ADDRESS | 1603 NW | V 81 V | NAY | | | | | 1.3 STREE | 1 ADDRESS | | | | |
| CITY-ST-ZIP | PLANTAT | TION I | FL 33322 | | | | | 1.4 CITY - | S1 - 71P | | | | |
| TITLE | <u> </u> | | | | | ☐ DEL | .ETE | 2.1 TITLE | | | | ☐ Chan | ge Addition |
| NAME | | | | | | | | 2.2 NAME | | | | | |
| STREET ADDRESS | | | | | | | | 2.3 STREE | I ADDRESS | | | | |
| CITY-ST-ZIP | | | | | | | | 2 4 CITY- | ST-ZIP | | | | |
| TITLE | | | | | | DEI | ETE | 3 1 1)TLF | | | | Chan | ge [] Addition |
| NAME I | | | | | | | | 3.2 NAME | - | | | | |
| STREET ADDRESS | | | | | | | | | T ADDRESS | | | | |
| CITY-ST-ZIP | | | | | | | | 3.4. CITY- | | | | | |
| TITLE | | | | | | DE | LETE | 4.1 THTLE | 0. 2.1 | | | ☐ Chan | ge Addition |
| NAME | | | | | | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | | | | | | | 1 ADDRESS | | | | |
| CITY-ST-ZIP | | | | | | | | 4.4 CITY- | | | | | |
| TITLE | · · · · · · · · · · · · · · · · · · · | | | | | DEL | LETE | 5.1 TITLE | 0, 1, | | | Chan | ge Addition |
| NAME | | | | | | | | 5.2 NAME | | | | | |
| STREET ADORESS | | | | | | | | | T ADDRESS | | | | |
| CITY-ST-ZIP | | | | | | | | 54 DILY | | | | | |
| TITLE | | | | | | DEI | LETE | 61 HILE | 57 - E11 | | | Chan | ge [] Addition |
| NAME | | | | | | | • | 62 NAME | Ì | | | | |
| STREET ADDRESS | | | | | | | | 1 | 1 ADDRESS | | | | |
| | | | | | | | | | | | | | |
| CITY-ST-ZtP | ov certify the | at the i | information | supplied v | vith II | his filing does n | not qualify | 6.4 DilY- for the ≪x | | ated in Section 119.07(3)(i). Florida Statut | es. I furthe | r certify t | hat the |
| informatio I am an of appears in | n indicated fficer or dire n Block 12 (| on this octor of or Bloc | s annual rep f the corpor ck 13 if char | port or sup ration or th nged, or p | plen o reg √ a/ | nental ännual re Jeiver or trusted attachmont vitt | port is true empower h an addic | e and acc od to exe ss. | urate and 1 cuto this re | ated in Soction 119.07(3)(i), Florida Statut that my-signature shall have the same leg sport as required by Chapter 607, Florida | al effect as Statulos; a | s if made nd that r | under oath; that my name |