2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Apr 21, 2004 8:00 am Secretary of State S82464 **DOCUMENT #** 1. Entity Name 04-21-2004 90091 019 ***150.00 EXCEL RENT A CAR. INC. Mailing Address 4005 NW 28 ST Principal Place of Business 4005 NW 28 ST MIAMI FL 33142 MIAM! FL 33142 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number NOT APPLICABLE Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent .7. Name and Address of New Registered Agent Name FRIED, MARK E Street Address (P.O. Box Number is Not Acceptable) 1110 BRICKELL AVE 7TH FLOOR MIAMI FL 33131 City Zip Code 8. The above named entitive solomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered a Signature, typed or printed heres of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition TITLE ☐ Detete TIFLE ☐ Change WILLIAMS, WELLINGTON PAME . NAME 4005 NW 28 ST STREET ADDRESS STREET ADDRESS MIAMI FL 33142 CITY: ST-ZIP CITY-ST-ZIP ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZEP Delete = ___ TITLE -TitlE: = - - - Addition-NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete MILE Change Change Addition NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition mle 🐪 ☐ Delete TITLE ☐ Change HALE NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 10 or Block 11 if

FILED

2004 FOR PROFIT CORPORATION

Ottachnew

305-871-8731 Daytime Phone #

ANNUAL REPORT								
DOCUMENT # S82464 1. Entity Name EXCEL RENT A CAR, INC.					0	HWChr 14032	nent	
Principal Place 4005 NW 28 MIAMI, FL 33	ST	Mailing Address 4005 NW 28 ST MIAMI, FL 33142 US			14032	7982		
2. Principal Place of Business		3. Mailing Address		Viliniary	<u> </u>	~~		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04182004	Chg-P	CR2E034 (10/03))
City & State		City & State		4. FEI Number NOT API	PLICABLE		Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of	f Status Desired	S8.75 A	
	6. Name and Address of Current	Registered Agent			7. Name and /	Address of New R	egistered Agent	
				Name				
FRIED, MARK E 1110 BRICKELL AVE				Street Address (P.O. Box Number is Not Acceptable)				
7TH FLOOR MIAMI, FL 33131								
MINION, 1 C 33131			-	City FL Zip Code				
	named entity submits this statement fi ions of registered agent.	or the purpose of changing its	registered	office or registe	ered agent, or both	n, in the State of Flo	orlda. I am familiar wit	h, and accept
SIGNATURE.							DATE	
	Signature, typed or printed name of registered agen				red when reinstating)	· · · · · · · · · · · · · · · · · · ·	UNIE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550	9. Election Campa Trust Fund Cont	-	19 \$!	5.00 May Be ided to Fees			
10.	0. OFFICERS AND DIRECTORS 11					CHANGES TO OFF	CERS AND DIRECTO	PRS IN 11
MUE	V	☐ Delete	TTILE	FR	ESIDENT		Change	Addition
NAME,	WILLIAMS, WELLINGTON		NAME	וער	CLIAMS TO	BELLINGTON		
STREET ADDRESS City-St-Zip	4005 NW 28 ST		STREET A		IAHI SL.			
	MIAMI, FL 33142	Пан.	TITLE	7.11	IAM JL.	32.97	☐ Chang	e Addition
TITLE. Name		☐ Delete	NAME				ET cumb	
STREET ADDRESS			STREET A	ADDRESS				
CITY-ST-ZIP			CITY-ST	-ZIP				
TITLE		☐ Delete	TITLE	1			Chang	e 🔲 Addition
NAME			NAME	ADDRESS				
STREET ADDRESS CITY-ST-ZIP	ال المراجعة		CITY-ST			" <u>" - 77</u> 277	أ د جانج مرتبسي	, <u></u>
TITLE		Delete	TITLE				☐ Chang	e 🔲 Addition
NAME			NAME					
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			CITY-ST	-ZIP			C7 0.	
TITLE		Delete	TITLE NAME				Chang	e 🗌 Addition
NAME STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			CITY-ST	I				
TITLE		☐ Delete	TITLE				Chang	e Addition
NAME			NAME					
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP		AL ALT #11	CITY-ST		Continue 140 07/07) Elorido Statut	I further corribe that the	e information
12. I hereby Indicated	certify that the information supplied will on this report or supplemental report	in this filing does not qualify for is true and that	r the exemp my signatur	otion stated in e shall have th	section 119.07(3)(in same legal effection	r, monda Statutes. t as if made under	oath; that I am an offi	cer or director
I OT THE CO	rporation or the receiver or trustee em i, or on an attachment with an address	Dowered to execute this redor	i as reduired	о оу опартег б	A, HUTIUM SIAIUIS	o, annu man my marr	io appoare in DiOCK 1	S SE BROOK THE