

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S84503** (9)
1. Corporation Name
DEMO RENT-A-CAR, INC.

Principal Place of Business
**2373 NW LEJEUNE RD.
MIAMI FL 33142
US**

Mailing Address
**2373 NW LEJEUNE RD.
MIAMI FL 33142
US**

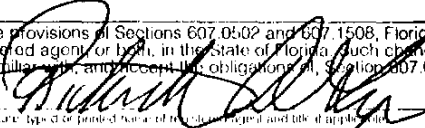


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1980 NW 42 AVE. Suite, Apt. #, etc. Demo Rent A Car City & State MIAMI FL. Zip 33126 Country USA		2a. Mailing Address 26 1980 NW 42 AVE. Suite, Apt. #, etc. Demo Rent A Car City & State MIAMI FL Zip 33126 Country USA		3. Date Incorporated or Qualified 10/03/1991	4. FEI Number 65-0291756 Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

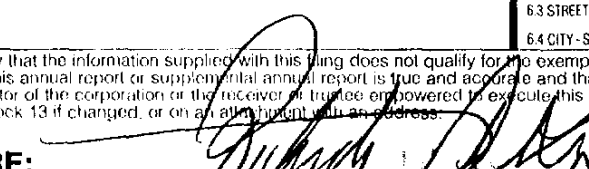
9. Name and Address of Current Registered Agent LYN, RICKARDO A. 2373 NW LEJEUNE RD. MIAMI FL 33142		10. Name and Address of New Registered Agent 81 Name LYN, RICKARDO A. 82 Street Address (P.O. Box Number is Not Acceptable) 1980 NW 42 AVE. 83 Demo Rent A Car 84 City MIAMI FL 85 Zip Code 33126	
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11. 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  **RICKARDO Lyn** DATE **4/19/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	LYN, RICKARDO A.	1.2 NAME	
STREET ADDRESS	681 NW 156 AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINE FL	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	LYN, CHELETA D.	2.2 NAME	
STREET ADDRESS	681 NW 156 AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for no 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 **4/19/98** **305 871-3500**

CR2E034 (10/97)