

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90073 026 ***150.00

DOCUMENT # S84503

1. Corporation Name

DEMO RENT-A-CAR, INC.

Principal Place of Business

1980 NW 42ND AVE
MIAMI FL 33126
US

Mailing Address

1980 NW 42ND AVE
MIAMI FL 33126
US

DO NOT WRITE IN THIS SPACE

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 1980 NW 42 Ave.

2a. Mailing Address

26 1980 NW 42 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MIAMI FL

City & State

28 MIAMI FL

Zip

24 33126

Country

25 DADE

Zip

29 33126

Country

30 DADE.

9. Name and Address of Current Registered Agent

LYN, RICKARDO A.
1980 NW 42ND AVE
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

LYN, RICKARDO

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

1980 NW 42 Ave

83

84 City

MIAMI

FL

85 Zip Code

33126

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 A. LYN

(NOTE: Registered Agent signature required when registering)

1/5/99

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME LYN, RICKARDO A.
STREET ADDRESS 661 NW 156 AVE
CITY-ST-ZIP PEMBROKE PINE FL

TITLE S ☒ DELETE

NAME LYN, CHELETA D.
STREET ADDRESS 661 NW 156 AVE.
CITY-ST-ZIP PEMBROKE PINES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

VICE PRESIDENT
DELEON CHRISTOPHER

2301 SW 139 PL
MIAMI FL 33175

2.2 NAME ☐ Change ☒ Addition

SECRETARY
DELEON CHRISTOPHER

2301 SW 139 PL
MIAMI FL 33175

2.3 STREET ADDRESS ☐ Change ☒ Addition

2.4 CITY-ST-ZIP
TREASURER
RICKARDO LYN
661 NW 156 AVE
Pembroke Pines FL 33028

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)

0180342