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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1997	DIVIS	ION OF COP	RPORATI	ONS	Secreta	ry o	l St	ate
DOCUMENT # V45589 (1) 1. Corporation Name HOLLYWOOD DRIVER'S LEASING, INC.									
Principal Plac	ce of Business	Mailing Address					41011 110 11 01411 1		
9501 94TH AVE		9501 94TH AVENUE NORTH LARGO FL 33777-2130							
Dirioo I L 340	14	D11100 12 00					T		
						 Date Incorporated or Qualified 06/22/1992 	3a. Date 04/16/		aport .
<u>'</u>	lace of Business	2a. Mailing Add	ress		······································	4. FEI Number			plied For
Suite Apt	# etc.	26 Suite, Apt. #	. etc.			20-2524112		\$8.75 A	1 Applicable
22		27				5. Certificate of Status Desired		Fee Re	
City & Sta	te	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zip		Country	y	8. This corporation has liability for	intangible tax	under s.	
24	25 9. Name and Address of Curr	ent Registered Agent	30	<u> </u>		Florida Statutes 10. Name and Address of New R	Yes		
FLYN	NN, MICHAEL JAMES, JR.	ent nagistered Agent		B1	Name	IV. Italijo dila radioae di lian it	a Bratal and 1-18		
	94TH AVENUE NORTH			82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		
LAR	30 FL 34647								
				83					
				84	City		FL	85 Zip (Code
office or agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obling arms, typed or professions of legistered.					rporation submits this statement for the ation's board of directors. I hereby acceuted when reinstating)	purpose of crept the appoin	anging its	registered
12.		ND DIRECTORS	MO:E. N	13.	let it signature requ	ADDITIONS/CHANGES TO OFF		RECTOR	S IN 12
TITLE	V	D	FLETE	1.1 TITLE				Change	Addition
NAME	FLYNN, KELLY			1.2 NAME					
STREET ADDRESS	7751 PARK BLVD N PINELLAS PARK FL		-		T ADDRESS				ŀ
Crty - St - ZiFr Title	P		ELETE	1.4 CITY- 2.1 TITLE	S1-ZIP			Change	Addition
NAME	FLYNN, MICHAEL J JR.	_	,	22 NAME				. •	_
STREET ADDRESS				2.3 STREE	T ADDRESS	•			
CITY-ST-ZIF	LARGO FL		ri ryc	2. 4 CITY	S1 - ZIP			Change	Addition
TITLE NAME		LJ U	ELETE	3.1 TITLE 3.2 NAME				1 rusilis	Addition
STREET ADDRESS					T ADDRESS				1
CHTY-ST-7/2				3 4. CITY-	i i]
1IILF			ELETE	4.1 TITLE				Change	☐ Addition
NAME				4. 2 NAME	1				
STREET ADDRESS					T ADDRESS				
CITY-ST ZIP THLE			ELETE	4.4 CITY -: 5.1 TITLE	91-7IL			Change	Addition
NAME				5.2 NAME				*	
STREET ADDRESS				5.3 STREE	T ADDRESS				i
CiTY-ST-7iP				5.4 CITY-	ST-ZIP			1	
1171.6		L.J 0	ELETE	6.1 TITLE			L	Change	Addition
NAME				6.2 NAME	1				
STREET ADORESS					T ADDRESS				

14. I do 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.

SIGNATURE:

FILED

May 05 1997 8:00am

Daylime Phone #