FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V47630** **(1)**

1. Corporation Name
ELEGANTE RENT A CAR, INC.

Principal Place of Business
1600 N.W. LEJEUNE ROAD
MIAMI FL 33126

Mailing Address
1600 N.W. LEJEUNE ROAD
MIAMI FL 33126

3. Date Incorporated or Qualified: **07/02/1992**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21 1600 NW LEJEUNE RD
Suite, Apt. #, etc.
22 302
City & State
23 MIAMI Florida
Zip 24 33126 Country 25

2a. Mailing Address
26 1600 NW LEJEUNE Road.
Suite, Apt. #, etc.
27 # 302
City & State
28 MIAMI Florida
Zip 29 33126 Country 30

4. FEI Number: **65-0345704** 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PARLADE, ALBERTO J.
3850 S.W. 87TH AVE.
SUITE 207
MIAMI FL 33165

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 ALBERTO J. PARLADE. DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	VARGAS, MANUEL E	
STREET ADDRESS	CALLE 10, AVENIDAS 13&15	
CITY, ST, ZIP	SAN JOSE, COSTA RICA	
TITLE	SD	☐ DELETE
NAME	VARGAS, GONZALO	
STREET ADDRESS	CALLE 10, AVENIDAS 13&15	
CITY, ST, ZIP	SAN JOSE, COSTA RICA	
TITLE	TD	☐ DELETE
NAME	VARGAS, RODOLFO	
STREET ADDRESS	CALLE 10, AVENIDAS 13&15	
CITY, ST, ZIP	SAN JOSE, COSTA RICA	
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
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: 1-29-96 305-871-4332

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)