

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995				FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V58831 (1) 1. Corporation Name ON LOCATION RENTALS, INC.					

APPROVED
AND
FILED

95 MAY -1 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

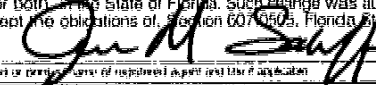
Principal Place of Business	Mailing Address
8921 CRESCENT DRIVE MIRAMAR FL 33025	8921 CRESCENT DRIVE MIRAMAR FL 33025

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 3700 N. 56TH AVE.		26 P.O. Box 2146		08/20/1992		04/20/1994	
22 Suite, Apt. #, etc. APT. 1024		27 Suite, Apt. #, etc.		4. FEI Number 65-0355624		Applied For Not Applicable	
23 City & State Hollywood, Florida		28 City & State Hallandale, Florida		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
24 Zip 33024		25 Country USA		29 Zip 33008-2146		30 Country USA	
23 Election Campaign Financing Trust Fund Contribution ☐		24 \$5.00 May Be Added to Fees		6. This corporation has liability for intangible tax under S. 190 (1)? Florida Statutes ☒ Yes ☐ No			

8. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SAKOFF, ALAN 8921 CRESCENT DRIVE MIRAMAR FL 33025				81 Name SAKOFF, ALAN 82 Street Address (P.O. Box Number is Not Acceptable) 3700 N. 56TH AVE. 83 APT. 1024 84 City Hollywood FL 85 Zip Code 33024			

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, within 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  4/24/95

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE P NAME SAKOFF, ALAN M STREET ADDRESS 8921 CRESCENT DR. CITY ST ZIP MIRAMAR FL 33025				1.1 TITLE P 1.2 NAME SAKOFF, ALAN M. 1.3 STREET ADDRESS 3700 N. 56TH AVE. APT. 1024 1.4 CITY ST ZIP HOLLYWOOD, FL. 33024			
TITLE NAME STREET ADDRESS CITY ST ZIP				2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY ST ZIP			
TITLE NAME STREET ADDRESS CITY ST ZIP				3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY ST ZIP			
TITLE NAME STREET ADDRESS CITY ST ZIP				4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY ST ZIP			
TITLE NAME STREET ADDRESS CITY ST ZIP				5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY ST ZIP			
TITLE NAME STREET ADDRESS CITY ST ZIP				6.1 TITLE 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(4)(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 887, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  ALAN M. SAKOFF 4/24/95 (205) 432-2005