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FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V67595

(1)

1. Corporation Name
ATLANTIC RENTALS INC.



Principal Place of Business

P.O. BOX 320514
COCOA BEACH FL 32932

Mailing Address

P.O. BOX 320514
COCOA BEACH FL 32932-0514

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

09/28/1992

3a. Date of Last Report

04/11/1996

4. FEI Number

59-3118193

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

PAGE, WILLIAM EARL
6811-B N. ATLANTIC AVENUE
CAPE CANAVERAL FL 32920

10. Name and Address of New Registered Agent

81 Name RICHARD REGAZZI
82 Street Address (P.O. Box Number is Not Acceptable)
6811-B N. ATLANTIC AVE
83
84 City CAPE CANAVERA FL 85 Zip Code 32920

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

Signature, typed or printed name of registered agent, and title, if applicable

(NOT) Registered Agent signature required when re-stating

RICHARD REGAZZI

4/17/97

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME REGAZZI, RICHARD M.
STREET ADDRESS 6811-B N. ATLANTIC AVE.
CITY-ST-ZIP CAPE CANAVERAL FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PRESIDENT

Change Addition

VICE President/Director
NAME ANTHONY STILE
STREET ADDRESS 6811-B N. ATLANTIC AVE
CITY-ST-ZIP CAPE CANAVERA, FL 32920

Change Addition

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

Signature, typed or printed name of registered agent, and title, if applicable

(NOT) Registered Agent signature required when re-stating

4-17-97

402-202-1452

CR2E034 (9/96)