

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 550783

FILED
Jan 27, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA EQUIPMENT RENTALS INC.

Current Principal Place of Business:

9030 N.W. 97 TERRACE
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

9030 N.W. 97 TERRACE
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 59-1782227 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAER, JAMES T.
9030 NW 97 TERRACE
MEDLEY, FL 33178 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BAER, JIM,
Address: 7960 SW 120 PL
City-St-Zip: MIAMI, FL 33183

Title: V () Delete
Name: BAER, ROBERT,
Address: 7252 SW 98TH ST
City-St-Zip: MIAMI, FL 33156

Title: S () Delete
Name: BAER, CAROL,
Address: 2917 LAKESHORE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VP () Delete
Name: BAER, RICHARD
Address: 7900 SW 125TH ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BAER

_____ Electronic Signature of Signing Officer or Director

V.P.

01/27/2009

_____ Date