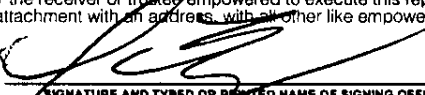


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # P93000002883		
1. Entity Name OUTPOST RENTALS, INC.		
Principal Place of Business 1255 W NINE MILE RD PENSACOLA, FL 32534 US		Mailing Address 1255 W NINE MILE RD PENSACOLA, FL 32534 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ABRAMS, KIRK E 1255 W NINE MILE RD PENSACOLA, FL 32534		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$850.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ABRAMS, KIRK E 1255 W NINE MILE RD PENSACOLA, FL 32534	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  KIRK ABRAMS		850-477-2185
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #



02272008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3162613

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

U00000871232
04/09/08-80124-001 150.00

**DO NOT WRITE
IN THIS SPACE**