


FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90214 005 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P96000027220			
1. Entity Name RENTAL EXPRESS, INC.			
Principal Place of Business 8321 PINES BLVD. PMEBROKE PINES, FL 33024 US		Mailing Address 1921 NO. DIXIE HIGHWAY POMPANO BEACH, FL 33060-5045	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	
Country		Country	
4. FEI Number 65-0661037		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SHOEMAKER, RICHARD L CPA 612 NE 26 STREET WILTON MANORS, FL 33305		Name: Kenneth Phillips	
		Street Address (P.O. Box Number is Not Acceptable) 5030 NE 26 Terr	
		City: Lighthouse Pt FL Zip Code: 33064	
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, the registered agent.			
SIGNATURE: <i>[Signature]</i>		DATE: 4-27-06	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILLIPS, KENNETH E 6030 NE 26 TERR LIGHTHOUSE POINT, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

\$5.00 May Be Added to Fees

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 reports 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 empowerers.

SIGNATURE: *[Signature]* DATE: **4-27-06**