

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 260627

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** EQUIPMENT RENTAL SERVICE, INC.

**Current Principal Place of Business:**

1858 OKEECHOBEE BLVD.  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

1858 OKEECHOBEE BLVD.  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

**FEI Number:** 59-0972918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MERCHANT, SHARON J  
1858 OKEECHOBEE BLVD  
WEST PALM BEACH, FL 33409 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MERCHANT, JEAN C  
Address: 7210 WEST LAKE DRIVE  
City-St-Zip: LAKE CLARKE SHORES, FL 33406

Title: VD  
Name: MERCHANT, SHARON J  
Address: 9 GRAEMOOR TERRACE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S  
Name: MERCHANT, LINDA R  
Address: 144 WORTH COURT NO.  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: T  
Name: MERCHANT, GLEN  
Address: 1231 LAKESIDE DRIVE NO  
City-St-Zip: LAKE WORTH, FL 33460

Title: D  
Name: MERCHANT, MERLE W JR.  
Address: 1118 N.E. 16TH PLACE  
City-St-Zip: FT. LAUDERDALE, FL 33305

I hereby 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 all other like empowered.

SIGNATURE: SHARON J. MERCHANT

VD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date