2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

J.MYERSCOUGH SR

SIGNATURE

Apr 24, 2006 08:00 AM Secretary of State **DOCUMENT # 315154** 1. Entity Name RENTZ AUTOMOTIVE, INC. Mailing Address Principal Place of Business 2430 RUTLAND LANE CLEARWATER FL 34623 2430 RUTLAND LANE CLEARWATER FL 34623 3. Mailing Address PO Box 21325 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number Applied For City & State City & State 59-1162819 Not Applica St. Petersburg, Fl Zip 33742 Country Zκο Isnoiroba 27.8\$ 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MYERSCOUGH, VICTOR J Street Address (P.O. Box Number is Not Acceptable) 2430 RUTLAND LANE **CLEARWATER FL 34623** City Zip Code 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 access the obligations of registered agent. SIGNATURE . Signature, typed or primed name of registered agent and lifts if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May 6 After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change III Adami ыце TITLE ☐ Delete U00000526268 NAME MYERSCOUGH SR., VICTOR J MARKE STREET AGORESS 05/04/06-80066-021 150.00 2430 RUTLAND LANE STREET ADDRESS CLEARWATER FL CHTY-SI-ZIP CITY-ST-78 Oelete Change Adding TITLE SD TITLE MAG VAN EE, BETSY HAME STREET ADDRESS STREET ADDRESS 2460 RUTLAND LN CITY-ST-ZIP CLEARWATER FL 33763 CITY - ST- ZIP Charge Addis. ☐ Detete THICE TITLE NAM NAME STREET ADDRESS STREET AUDRESS CITY-ST-ZIP EITY-ST-ZE Delete TITLE ☐ Change Additio NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-70P Change Additio ☐ Delete TRUE TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP Delete Change ☐ Additio TIRE NAME NAME STRELL ADDRESS STREET ADDRESS CHY-SI-ZP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. (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 em 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 attachagent with an address, with all other like empowered.

PRES

FILED

4-18-2006