

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 02 1997 8:00am  
Secretary of State

DOCUMENT # 540822

(4)

1. Corporation Name:

PLANT RENTALS, INC.



Principal Place of Business  
3245 VILLAGE GREEN DRIVE  
MIAMI FL 33175

Mailing Address  
3245 VILLAGE GREEN DRIVE  
MIAMI FL 33175-3148

3. Date Incorporated or Qualified  
06/28/1977

3a. Date of Last Report  
06/05/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
59-1771502

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEWART, DONNARAE  
13350 SW 128TH ST.  
MIAMI FL 33186

81

Name

THOMAS C. ROXBURGH

82

Street Address (P.O. Box Number is Not Acceptable)

3245 VILLAGE GREEN DRIVE

83

84

City

MIAMI

FL

85

Zip Code

33175

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/24/97

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE ☐ DELETE

NAME  
PO ROXBURGH, THOMAS  
STREET ADDRESS  
3245 VILLAGE GREEN DR  
CITY-ST-ZIP  
MIAMI, FL 00000

11.2 TITLE ☐ DELETE

NAME  
ST ROXBURGH, PHILIPP A  
STREET ADDRESS  
3245 VILLAGE GREEN DR  
CITY-ST-ZIP  
MIAMI, FL 00000

11.3 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

11.4 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

11.5 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

11.6 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

11.7 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President.

4/24/97

Date

(305) 557-4110

Daytime Phone

CR2E034 (9/96)