2007 FOR PROFIT CORPORATION

## **ANNUAL REPORT (AR) DOCUMENT # 830858** 1. Entity Name **ELECTRO RENT CORPORATION**

the obligations of registered agent.

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Signature, typed or printed name of registered agent and title r applicable.

SIGNATURE

SIGNATURE:



DATE

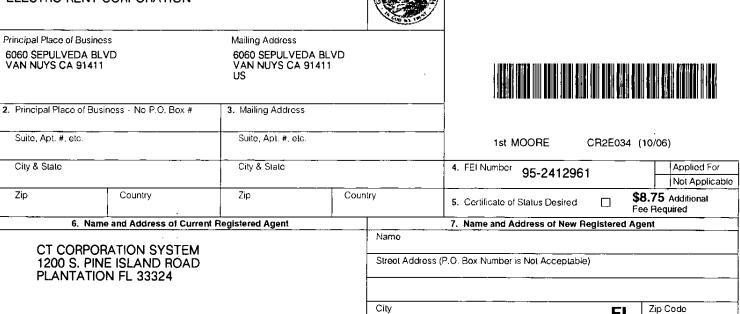
\$5.00 May Be

Added to Fees

9. Election Campaign Financing

Trust Fund Contribution.

05-04-2007 90065 019 \*\*\*150.00



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

(NOTE Registered Agent signature required when reinstaling)

маке спес	k Payable to Florida Department of State			ļ			
10.	OFFICERS AND DIRECTOR	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-71P	D BARRONE, GERALD 6060 SEPULVEDA BLVD. VAN NUYS CA 91411	☐ Delete	TIFLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP	VS MARKHEIM, STEVE 6060 SEPULVEDA BLVD. VAN NUYS CA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	D BEKAVAC, NANCY 6060 SEPULVEDA BLVD. VAN NUYS CA 91411	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PHILLIPS, GARY 6060 SEPULVEDA BLVD. VAN NUYS CA	Delete	TITLE NAME SIRFET ADDRESS CITY-SI-ZIP			☐ Change	Addition
MILE NAME STREET ADDRESS CIPY-ST-ZIP	C GREENBERG, DANIEL 6060 SEPULEVDA BLVD. VAN NUYS CA	□ Delete	THILE NAME STRIET ADDRESS CITY-ST-ZIP			☐ Change	Addition
IITLE NAME SIREET ADDRESS CITY-ST-ZIP	V JONES, CRAIG 6060 SEPULVEDA BLVD VAN NUYS CA	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR