2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007
Secretary of State

DOCUMENT# F03000004187

Entity Name: NATIONAL RENTAL GROUP FINANCING INC.

Current Principal Place of Business:

6929 N. LAKEWOOD AVE.
SUITE 100 MOD 1.2 202
TULSA, OK 741171808

New Principal Place of Business:

Current Mailing Address:

6929 N. LAKEWOOD AVE.
SUITE 100 MOD 1.2 202
TULSA, OK 741171808

New Mailing Address:

FEI Number: 14-1892900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DPT	( ) Delete
Name:	FIGUEROA, ORLANDO	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	
Title:	DVS	( ) Delete
Name:	FIORAVANTI, ALBERT	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	
Title:	D	( ) Delete
Name:	ABEDINE, BENJAMIN	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	
Title:	D	( ) Delete
Name:	BRADY, MARY	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	
Title:	DAS	( ) Delete
Name:	GEBRON, LORI	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	
Title:	ASVP	( ) Delete
Name:	GORDON, JILL	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	ASVP	(X) Change ( ) Addition
Name:	KEITH, AMY S	
Address:	48 WALL ST	
City-St-Zip:	NEW YORK, NY 10005	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: /AMY S. KEITH/ ASVP 01/10/2007

Electronic Signature of Signing Officer or Director — Date