

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # F94000001592**

1. Entity Name  
**WILSHIRE RENTAL CORP.**



**FILED**

**07 APR -3 PM 3: 53**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business <b>13737 NOEL ROAD SUITE 100 DALLAS, TX 75240</b>	Mailing Address <b>13737 NOEL ROAD SUITE 100 DALLAS, TX 75240</b>
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*lf*



2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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01122007 Chg-P CR2E034 (12/06)

City & State  Zip Country	City & State  Zip Country
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4. FEI Number <b>95-4107146</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_

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

City \_\_\_\_\_ **FL** 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 accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LARSEN, CAITLIN M <input type="checkbox"/> Delete 13737 NOEL ROAD, SUITE 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MACK, KRISTINA A <input type="checkbox"/> Delete 13737 NOEL ROAD, SUITE 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PULLEN, TIMOTHY L <input type="checkbox"/> Delete 13737 NOEL ROAD., STE 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHERMAN, JEFFREY S <input type="checkbox"/> Delete 13737 NOEL ROAD, SUITE 100 DALLAS, TX 75240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition  <b>300096381043</b> <b>04/11/07--01004--004 **150.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in the instructions to this report of the corporation or if changed, or on an alt:

**SIGNATURE:** *Kristina A. Mack*

Kristina A. Mack, Asst Sec, 3/28/07  
Phone 469-893-2701