


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # G12511 1. Entity Name VINTAGE ROLLS RENTALS, INC.	
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Principal Place of Business 255 COREY AVENUE P.O. BOX 67128 ST. PETE BCH., FL 33736	Mailing Address 255 COREY AVENUE P.O. BOX 67128 ST. PETE BCH., FL 33736
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01252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2375158	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLINGEL, JOSEPH W.
255 COREY AVENUE
ST. PETE BCH., FL 33706

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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	PD KLINGEL, JOSEPH W 255 COREY AVENUE SAINT PETE BEACH, FL 33706
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SEELEY, ANN 255 COREY AVENUE SAINT PETERSBURG, FL 33706
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/28/08-80064-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, willfall other like empowered.

SIGNATURE:

 **JOSEPH W. KLINGEL**

4-9-08 (727) 367-7602

Date Daytime Phone