


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2006 8:00 am
Secretary of State

05-22-2006 90044 048 ***150.00

DOCUMENT # G44629	
1. Entity Name JASON RENTS, INC.	

Principal Place of Business 763 NORTH ALTERNATE A1A JUPITER, FL 33477 US	Mailing Address 763 NORTH ALTERNATE A1A JUPITER, FL 33477 US
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DO NOT WRITE IN THIS SPACE

40093753



03162006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2370348	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BUCKLES, JASON R. 10818 SE HOBART ST 1 TEQUESTA, FL 33469

**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: BARBARA A. BUCKLES Barbara Buckle 5/15/06
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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	PT BUCKLES, JASON R. 10818 SE HOBART ST TEQUESTA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUCKLES, JASON R. 10818 SE HOBART ST TEQUESTA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PALENCHAR, STEVE J 256 CABANA PT., CIR STUART, FL 34994
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BUCKLES, BARBARA 8802 SE SANDCASTLE CIRCLE HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Registered Agent BUCKLES, BARBARA 8802 S.E. Sandcastle Circle Hobe Sound, FL 33455
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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, with all other like empowered.

SIGNATURE: Barbara Buckle 5/15/06 561747-4665
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40093753
#G44629

We thought that this was
there on the Internet but
apparently did not.

That is why this report is
faded later.

Barbara Buehler
561-747-4665