2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H71161

Entity Name: MARIANNA RENTAL AND LEASING, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2961 PENN AVENUE P.O. BOX 757 MARIANNA, FL 32447 2961 PENN AVENUE MARIANNA, FL 32448

Current Mailing Address:

New Mailing Address:

2961 PENN AVENUE P.O. BOX 757

P O BOX 757

MARIANNA, FL 32447

MARIANNA, FL 32447

FEI Number: 19-6309183

RAHAL, QUEN

FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GARCIA, JORGE A 2961 PENN AVE

4204 W. LAFAYETTE ST. MARIANNA, FL 32446

MARIANNA, FL 32448 US

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: JORGE GARCIA

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete

RAHAL, QUEN Name:

700 HIGHWAY 90 WEST Address:

MARIANNA, FL City-St-Zip:

Title: () Delete

Name: RAHAL, ANN

700 HIGHWAY 90 WEST Address:

MARIANNA, FL City-St-Zip:

Title: () Delete GARCIA, JORGE Name:

2961 PENN AVE. Address:

City-St-Zip: MARIANNA, FL 32446

Title: () Delete

GRIFFIN, DONNA Name: Address: 2961 PENN AVE City-St-Zip: MARIANNA, FL 32446 Title: (X) Change () Addition

GARCIA, JORGE A Name: 2961 PENN AVE Address: MARIANNA, FL 32448 City-St-Zip:

Title: VΡ (X) Change () Addition

RAHAL, ANN Name:

4204 W LAFAYETTE ST Address: MARIANNA, FL 32446 City-St-Zip:

Title: (X) Change () Addition RAHAL, ANN Name:

4204 W LAFAYETTE ST Address:

City-St-Zip: MARIANNA, FL 32446

Title: (X) Change () Addition

GRIFFIN, DONNA Name: Address: 2961 PENN AVE City-St-Zip: MARIANNA, FL 32448

I hereby certify that the information supplied with this filing does not qualify 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: DONNA GRIFFIN AS 04/23/2009