## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT** #

Principal Place of Business

K54671

NEFF RENTAL, INC.

Mailing Address

8600 NW 36TH ST.

4343 N.W. 76TH AVENUE

**FILED** Mar 06 1998 8:00am Secretary of State

|--|--|--|

| 8TH FLOOR MIAMI FL 33166<br>MIAMI FL 33166  |   |  | DO NOT WRITE IN THIS SPACE                  |  |  |
|---|---|--|---|--|--|
| US  |   | 3. Date Incorporated or Qualified  |   |  |  |
|   |   |  |   | 12/29/1988   |  |
| 2. Principal P  | lace of Business  | 2a. Mailing Address  | a Aua                                       | 4. FEI Number Applied For  |  |
| 21  | 3750 NW 87th Ave  | 26   | 1 rive                                      | 65-0160403 Not Applicable  |  |
| Suite, Apt.   | #. etc.<br>8uHe 400   | Suite, Apt. #, etc.  | <b>)</b>                                    | 5. Certificate of Status Desired S8.75 Additional Fee Required                     |  |
| City & Stat   | Miami Fla   | City & State   | Fla   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |  |
| Zip .   | Country   | Zip  | Country                                     | 8. This corporation owes or has paid the current year Intangible                   |  |
| 24 35   | 3178 25 USA   | 29 33178 30  | - 12/A                                      | Personal Property Tax due June 30. X Yes No  |  |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  |   |  |   |  |  |
| THE PRENTICE-HALL CORPORATION SYSTEM, INC.  81 Name   |   |  |   |  |  |
| 1201 HAYS STREET 82 Street Addre  |   |  | Address (P.O. Box Number is Not Acceptable) |  |  |
| SUITE 105   |   |  |   |  |  |
| TA  | LLAHASSEE FL 32301  |  | 83  |  |  |
|   |   |  | 84 City                                     | FL 85 Zip Code   |  |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pamed corporation submits this statement for the purpose of changing its registered |   |  |   |  |  |
| office or r<br>agent. I a   | egi <b>ster</b> ed agent, or both, in the State o<br>m f <b>am</b> iliar with, and accept the obligat | f Florida Such change was auth<br>ions of, Section 607,05 <b>0</b> 5, Florid | horized by the corr<br>la Statutes.         | poration's board of directors. I hereby accept the appointment as registered       |  |
| SIGNATURE   |   |  |   |  |  |
|   | Signature, typed or printed name of registered agent  |  |   | required when reinstaling) DATE  |  |
| 12.   | OFFICERS AND  | DELETE   | 13.   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition                |  |
| THTLE   | MAS, JORGE  | L_J DELETE   | 1.1 TITLE                                   | Change Addition  |  |
| NAME  | MAS, JUNGE<br>10441 S.W. 187TH ST   |  | 1.2 NAME                                    | 3750 N.W. 87th Ave. Suite 400  |  |
| STREET ADDRESS  | MIAMI FL  |  | 1.3 STREET ADDRESS                          | Miami Fla 33178  |  |
| CITY - ST - ZIP<br>TITLE  | P   | DELETE   | 1.4 CITY-ST-ZIP<br>2.1 TITLE                | Change Addition  |  |
| NAME  | FITZGERALD, KEVIN P   |  | 2.2 NAME                                    |  |  |
| STREET ADDRESS  | 4343 NW 76TH AVE.   |  | 2.3 STREET ADDRESS                          | 3750 N.W. 87th Ave. Suite 400  |  |
| CITY-ST-ZIP   | MIAMI FL 33166  |  | 2.4 CITY-ST-ZIP                             | Miami FL 33178   |  |
| TITLE   | VP .  | DELETE   | 3.1 TITLE                                   | <b>VP</b> ☐ Change <b>X</b> Addition   |  |
| NAME  | WARREN, ROBERT S  |  | 3.2 NAME                                    | PETE GLADIS  |  |
| STREET ADDRESS  | 4343 NW 76TH AVE.   |  | 3.3 STREET ADDRESS                          | 3750 N.W. 87th Ave Suite 400   |  |
| CITY-ST-ZIP   | MIAMI FL 33166  | <u>,</u>   | 3.4. CITY - ST - ZIP                        | Miami Ha 33178   |  |
| TITLE   | S   | ☐ DELETE   | 4.1 TITLE                                   | <b>☒</b> Change ☐ Addition   |  |
| NAME  | FITZGERALD, KEVIN P   |  | 4. 2 NAME                                   |  |  |
| STREET ADDRESS  | 4343 NW 76TH AVE.   |  | 4.3 STREET ADDRESS                          | 3750 N.W. 87th Are Svite 400   |  |
| CITY-ST-ZIP   | MIAMI FL 33166  | DELETE   | 4.4 CITY-ST-ZIP                             | <u> </u>   |  |
| TITLE   | FITZGERALD, KEVIN P   |  | 5.1 TITLE                                   | Change Addition  |  |
| NAME<br>STREET ADDRESS  | 4343 NW 76TH AVE  |  | 5.2 NAME<br>5.3 STREET ADDRESS              | 3750 NW 87th AVE SUITE 400   |  |
| CITY-ST-ZIP   | MIAMI FL 33166  |  | 5.4 CITY-ST-ZIP                             | MIAMI, FL 33178  |  |
| TITLE   | THE WILL I IS NOT IN  | DELETE   | 6.1 TITLE                                   | Change   |  |
| NAME  |   |  | 6.2 NAME                                    | -03/03/3801011010 <b>02.</b> (   |  |
| STREET ADDRESS  |   |  | 6.3 STREET ADDRESS                          |  |  |
| City-St-ZIP   |   |  | 6.4 CITY-ST-ZIP                             | ***150.00  |  |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: