

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013797

Entity Name: RENTABLES USA, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

11904 MIRAMAR PARKWAY
MIRAMAR, FL 33025 US

New Principal Place of Business:

10200 W STATE ROAD 84
106
DAVIE, FL 33324 US

Current Mailing Address:

11904 MIRAMAR PARKWAY
MIRAMAR, FL 33025 US

New Mailing Address:

10200 W STATE ROAD 84
106
DAVIE, FL 33324 US

FEI Number: 87-0740743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVAREZ, ELIZABETH
3931 SW 146 AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

ALVAREZ, FERNANDO
10200 W STATE ROAD 84
106
DAVIE, FL 33324 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: FERNANDO ALVAREZ

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALVAREZ, FERNANDO
Address: 3931 SW 146 AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM () Delete
Name: ALVAREZ, ELIZABETH
Address: 3931 SW 146 AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALVAREZ, FERNANDO
Address: 10200 W STATE ROAD 84
City-St-Zip: DAVIE, FL 33324 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FERNANDO ALVAREZ

MGR

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date