

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L89320

FILED
Apr 23, 2007
Secretary of State

Entity Name: JIMMY'S EQUIPMENT RENTAL, INC.

Current Principal Place of Business:

P.O. BOX 823808
PEMBROKE PINES, FL 33082 US

New Principal Place of Business:

3961 S. W. 82 TERRACE
DAVIE, FL 33328 US

Current Mailing Address:

P.O. BOX 823808
PEMBROKE PINES, FL 33082 US

New Mailing Address:

FEI Number: 65-0211152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHELNUT, JAMES C.
19000 S. W. 53 STREET
S. W. RANCHES, FL 33332 US

Name and Address of New Registered Agent:

SHELNUT, JAMES C.
3961 S. W. 82 TERRACE
DAVIE, FL 33328 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: JAMES SHELNUT

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SHELNUT, JAMES D.
Address: 4900 SW 167 AVE
City-St-Zip: FT LAUDERDALE, FL 33331

Title: PD () Delete
Name: SHELNUT, JAMES C.
Address: P.O. BOX 823808
City-St-Zip: PEMBROKE PINES, FL 33082 US

Title: ST () Delete
Name: WAGGONER, GLENNA S
Address: 3961 S.W. 82 TERRACE
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SHELNUT, JAMES D.
Address: 3961 S. W. 82 TERRACE
City-St-Zip: FT LAUDERDALE, FL 33328

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES SHELNUT

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04/23/2007

Electronic Signature of Signing Officer or Director

Date