2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M02000000135

HERTZ GENERAL INTEREST LLC



FILED Apr 27, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

225 BRAE BLVD. PARK RIDGE, NJ 07656 225 BRAE BLVD. PARK RIDGE, NJ 07656

DO NOT WRITE IN THIS SPACE

04112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 22-3840057 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of char the obligations of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THE HERTZ CORPORATION 225 BRAE BLVD. PARK RIDGE, NJ 07656
NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby o	certify that the information supplied with this filing does not qualify for the ex

U00000737897 05/11/07-80046-010 50.00

DO NOT WRITE IN THIS SPACE

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 is true and accurate and that my 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 sustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR REINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

John Szot

201-307-2366

Daytime Phone #