2005 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 19, 2005 08:00 AM Secretary of State DOCUMENT # M97000000280 WILLSCOT EQUIPMENT, LLC. Principal Place of Business Mailing Address 8211 TOWN CENTER DRIVE 8211 TOWN CENTER DRIVE BALTIMORE, MD 21236 BALTIMORE, MD 21236 04082005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2037040 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NATIONAL CORPORATE RESEARCH, LTD., INC. DO NOT WRITE 103 N. MERIDIAN STREET TALLAHASSEE, FL 32301-0000 IN THIS SPACE 8. 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. I am famillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE WILLIAMS SCOTSMAN, INC. NAME U00000316159 04/19/05-80063-018 50.00 STREET ADDRESS 8211 TOWN CENTER DRIVE BALTIMORE, MD 21236 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. 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 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes,

SIGNATURE:

City-st-7iP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE