2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041683

Entity Name: DOLPHIN RENTALS, INC.

BOCA GRANDE, FL 33921

City-St-Zip:

FILED Feb 16, 2009 Secretary of State

| Entity Nai | me: DOLPHII | N RENTALS, INC. | | | | | | |
|---|---|---------------------|------------------|---|--|---|--------------------|--|
| Current Principal Place of Business: | | | | New Princ | New Principal Place of Business: | | | |
| 421 PARK BOCA GRANDE, FL 33921 | | | | 471 PARK BOCA GRA | 471 PARK BOCA GRANDE, FL 33921 | | | |
| Current Mailing Address: | | | | New Maili | New Mailing Address: | | | |
| P.O. BOX BOCA GR | 888 ANDE, FL 339 | 921 | | | | | | |
| FEI Number | : 65-1018470 | FEI Number Appli | ed For() | FEI Number Not Appl | icable () | Certificate of Sta | itus Desired () | |
| Name and Address of Current Registered Agent: | | | | | Name and Address of New Registered Agent: | | | |
| PUNTA Go | ARION AVENL ORDA, FL 339 | 950 US | nent for the pur | pose of changing i | s registere | ed office or registere | ed agent, or both, | |
| SIGNATU | | | | | | | | |
| | Electron | nic Signature of Re | • | | | Date | | |
| OFFICERS AND DIRECTORS: | | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | PSTD (HEIMANN, WA' P.O. BOX 888 BOCA GRANDI | | | Title: Name: Address: City-St-Zip: | | () Change () Addition | nc | |
| Title: Name: Address: | S (CAMP, JULIE A 471 PARK AVE | | | Title: Name: Address: | S CAMP, JUL 471 PARK | (X) Change ()Addition LIE A AVE, P.O. BOX 888 | on | |

City-St-Zip: BOCA GRANDE, FL 33921

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 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: JULIE A. CAMP S 02/16/2009