

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082484

FILED  
Jan 21, 2006  
Secretary of State

Entity Name: RENTAR IBEROAMERICA, INC.

## Current Principal Place of Business:

151 CRANDON BLVD.  
#528  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

## Current Mailing Address:

151 CRANDON BLVD.  
#528  
KEY BISCAYNE, FL 33149

## New Mailing Address:

FEI Number: 20-0159599      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SADER, ALONSO  
151 CRANDON BLVD.  
#528  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SADER, ALONSO  
Address: 151 CRANDON BLVD. #528  
City-St-Zip: KEY BISCAYNE,, FL 33149

Title: V ( ) Delete  
Name: SADER, MARIA  
Address: CALLE LA LOMA, QTA MARIA-LUIS, CLUB HIPICO  
City-St-Zip: CARACAS, DF 1080

Title: V ( ) Delete  
Name: SADER, JORGE  
Address: 151 CRANDON BLVD. #528  
City-St-Zip: CARACAS, DF 1080

Title: V ( ) Delete  
Name: SADER, MARYEM  
Address: CALLE LA LOMA, QTA MARIA-LUIS, CLUB HIPICO  
City-St-Zip: CARACAS, DF 1080

Title: V (X) Delete  
Name: SADER, MONICA  
Address: CALLE LA LOMA, QTA MARIA-LUIS, CLUB HIPICO  
City-St-Zip: CARACAS, 10 1080

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: SADER, MARIA  
Address: CALLE LA LOMA, QTA MARIA-LUIS, CLUB HIPICO  
City-St-Zip: CARACAS, DF 1080

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

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: ALONSO SADER

P

01/21/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date