

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90011 005 ***150.00

DOCUMENT # P03000106939



1. Entity Name
EXCEL EQUIPMENT RENTAL, INC.

Principal Place of Business
**6111 SW 186TH WAY
SOUTHWEST RANCHES, FL 33332**

Mailing Address
**6111 SW 186TH WAY
SOUTHWEST RANCHES, FL 33332**

44047746

2. Principal Place of Business

3. Mailing Address

P.O. Box 327424

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07062004

Chg-P

CR2E034 (10/03)



City & State

City & State

Fort Lauderdale, FL

4. FEI Number

68-0569018

Applied For

Not Applicable

Zip

Country

Zip

33332

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GIBBONS, MARK T
6111 SW 186TH WAY
SOUTHWEST RANCHES, FL 33332**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Mark T. Gibbons

06-30-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	GIBBONS, MARK T	
STREET ADDRESS	6111 SW 186TH WAY	
CITY- ST- ZIP	SOUTHWEST RANCHES, FL 33332	
TITLE	V	<input type="checkbox"/> Delete
NAME	SCHULLE, CHRISTOPHER	
STREET ADDRESS	7613 SW 8TH STREET	
CITY- ST- ZIP	NORTH LAUDERDALE, FL 33068	
TITLE	T	<input type="checkbox"/> Delete
NAME	GIBBONS, TRACY	
STREET ADDRESS	6111 SW 186TH WAY	
CITY- ST- ZIP	SOUTHWEST RANCHES, FL 33332	
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **Mark T. Gibbons**

06-30-04

954-444-5328

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #