

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000149276

Entity Name: L M RENTALS, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

8909 IRVING AVE
SURFSIDE, FL 33154

New Principal Place of Business:

Current Mailing Address:

8909 IRVING AVE
SURFSIDE, FL 33154

New Mailing Address:

FEI Number: 73-1693053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MENDEZ, MARIE
8909 IRVING AVE
SURFSIDE, FL 33154 US

Name and Address of New Registered Agent:

MENDEZ, MARIE
8909 IRVING AVE
SURFSIDE, FL 33154 US

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: MARIE MENDEZ

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MENDEZ, MARIE
Address: 370 N.E. 211 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VPSD () Delete
Name: MENDEZ, LUIS MICHAEL
Address: 370 N.E. 211 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: TD () Delete
Name: NACHON, CARLOS
Address: 2477 WEST 4TH AVENUE
City-St-Zip: HIALEAH, FL 33010 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENDEZ, MARIE
Address: 8909 IRVING AVE
City-St-Zip: SURFSIDE, FL 33154

Title: VPSD (X) Change () Addition
Name: MENDEZ, LUIS MICHAEL
Address: 8909 IRVING AVE
City-St-Zip: SURFSIDE, FL 33154

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

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: MARIE MENDEZ

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date