2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT FILED Jul 21, 2006 08:00 AN DOCUMENT # P04000069051 **Secretary of State** 1. Entity Name PIERRE JACKSON EQUIPMENT RENTAL INC. Principal Place of Business Mailing Address 1409 SW ABINGDON AVE. 1409 SW ABINGDON AVE. PORT ST. LUCIE, FL 34953 PORT ST. LUCIE, FL 34953 07142006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0990252 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JACKSON, PIERRE DO NOT WRITE 1409 SW ABINGDON AVE. PORT ST. LUCIE, FL 34953 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 familiar with, and accept the obligations of registered agent. SIGNATURE sture, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 6, 2006 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE NAME JACKSON, PIERRE STREET ADDRESS 1409 SW ABINGDON AVE. U00000571591 CITY-ST-ZIP PORT ST. LUCIE, FL. 34953 07/21/08-80002-014 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Yeur/action

CITY-ST-ZIP