

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 20, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000087657

1. Entity Name

BRITT PARTY RENTAL CORP.



Principal Place of Business

12786 NW 98TH PLACE  
HIALEAH GARDENS, FL 33018

Mailing Address

12786 NW 98TH PLACE  
HIALEAH GARDENS, FL 33018



01042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number	Applied For
16-1701161	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, BRITANIA  
12786 NW 98 PLACE  
HIALEAH, FL 33018

**DO NOT WRITE  
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

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**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DIAZ, BRITANIA
STREET ADDRESS	12786 NW 98TH PLACE
CITY-ST-ZIP	HIALEAH GARDENS, FL 33018

TITLE	D
NAME	DIAZ, ROGER
STREET ADDRESS	12786 NW 98TH PLACE
CITY-ST-ZIP	HIALEAH GARDENS, FL 33018

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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03/03/06-80024-010 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-2006

Date

Daytime Phone #