

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000088924

Entity Name: HAINES CITY RENTALS, INC.

FILED
Jan 11, 2006
Secretary of State

Current Principal Place of Business:

1348 US HWY 17/92
HAINES CITY, FL 33844

New Principal Place of Business:

1348 US HWY 17/92N
HAINES CITY, FL 33844

Current Mailing Address:

1348 US HWY 17/92
HAINES CITY, FL 33844

New Mailing Address:

1348 US HWY 17/92N
HAINES CITY, FL 33844

FEI Number: 20-0675382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, ANIBAL
369 SAHALLI CT
DAVENPORT, FL 33837 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: PEREIRA, CARMEN
Address: 369 SANHALLI CT
City-St-Zip: DAVENPORT, FL 33844

Title: T () Delete
Name: PEREZ PEREIRA, ANIBAL
Address: 369 SANHALLI CT
City-St-Zip: DAVENPORT, FL 33844

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: PEREIRA, CARMEN
Address: 1008 RONLING ST
City-St-Zip: HAINES CITY, FL 33837

Title: P (X) Change () Addition
Name: PEREZ- PEREIRA, ANIBAL
Address: 369 SAHALLI CT
City-St-Zip: DAVENPORT, FL 33837

Title: VP () Change (X) Addition
Name: PEREZ-LOPEZ, ELIANIBAL
Address: 369 SAHALLI CT
City-St-Zip: DAVENPORT, FL 33837

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: ANIBAL PEREZ-PEREIRA

P

01/11/2006

Electronic Signature of Signing Officer or Director

_____ Date