

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000094314

Entity Name: THINKRENTALS.COM, INC.

FILED
Sep 04, 2007
Secretary of State

Current Principal Place of Business:

307 JESSAMINE
NEW SMYRNA BCH, FL 32169

New Principal Place of Business:

TURKEY MTN RD
JAMAICA, VT 05343

Current Mailing Address:

307 JESSAMINE
NEW SMYRNA BCH, FL 32169

New Mailing Address:

P.O. BOX 244
JAMAICA, VT 05343

FEI Number: 04-3794266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22 ST 4TH FL
MIAMI, FL 33145 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: FAULKNER, THOMAS A
Address: 307 JESSAMINE
City-St-Zip: NEW SMYRNA BCH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FAULKNER, THOMAS A
Address: P.O BOX 244
City-St-Zip: JAMAICA, VT 05343

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: THOMAS A FAULKNER

PSTD

09/04/2007

Electronic Signature of Signing Officer or Director

Date