
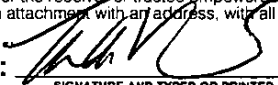


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2008 8:00 am**  
**Secretary of State**

05-02-2008 90124 038 \*\*\*150.00

<b>DOCUMENT # P04156</b> 1. Entity Name <b>HERTZ TRANSPORTING, INC.</b>					
Principal Place of Business <b>225 BRAE BLVD PARK RIDGE, NJ 07656-0713</b>			Mailing Address <b>225 BRAE BLVD PARK RIDGE, NJ 07656-0713</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>13-3215204</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOTHWANG, JOSEPH R 225 BRAE BLVD PARK RIDGE, NJ 07656 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ROLFE, HAROLD E 225 BRAE BLVD PARK RIDGE, NJ <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/SECRETARY ZIMMERMAN, J. JEFFREY 225 BRAE BLVD. PARK RIDGE, NJ 07656 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ELYSE, DOUGLAS 225 BRAE BLVD. PARK RIDGE, NJ 07656 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/VP/TREASURER DOUGLAS, ELYSE 225 BRAE BLVD. PARK RIDGE, NJ 07656 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FRANZESE, LOUIS R 225 BRAE BLVD. PARK RIDGE, NJ 07656 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/DIRECTOR BAKER, LEIGHANNE G. 225 BRAE BLVD. PARK RIDGE, NJ 07656 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SIRACUSA, PAUL 225 BRAE BLVD PARK RIDGE, NJ 07656 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SZOT, JOHN M. 225 BRAE BLVD PARK RIDGE, NJ <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> 			/ Thomas A. Vairo <b>4/23/2008</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

HERTZ TRANSPORTING, INC.  
DIRECTORS AND OFFICERS

**ATTACHMENT**

40092637

# P04156

DIRECTORS

OFFICE ADDRESS

Joseph R. Nothwang

225 Brae Boulevard  
Park Ridge, NJ 07656

Elyse Douglas

225 Brae Boulevard  
Park Ridge, NJ 07656

LeighAnne G. Baker

225 Brae Boulevard  
Park Ridge, NJ 07656

OFFICERS

OFFICE ADDRESS

Joseph R. Nothwang  
President

225 Brae Boulevard  
Park Ridge, NJ 07656

LeighAnne G. Baker  
Vice President

225 Brae Boulevard  
Park Ridge, NJ 07656

Elyse Douglas  
Vice President & Treasurer

225 Brae Boulevard  
Park Ridge, NJ 07656

J. Jeffrey Zimmerman  
Vice President & Secretary

225 Brae Boulevard  
Park Ridge, NJ 07656

Anthony C. Fiore  
Assistant Secretary

225 Brae Boulevard  
Park Ridge, NJ 07656

Louis R. Franzese  
Assistant Secretary

225 Brae Boulevard  
Park Ridge, NJ 07656

I. David Parkoff  
Assistant Secretary

225 Brae Boulevard  
Park Ridge, NJ 07656

John M. Szot  
Assistant Secretary

225 Brae Boulevard  
Park Ridge, NJ 07656

Thomas A. Vairo  
Assistant Secretary

225 Brae Boulevard  
Park Ridge, NJ 07656

Christopher F. Donus  
Assistant Treasurer

225 Brae Boulevard  
Park Ridge, NJ 07656

William F. Holzmann  
Assistant Treasurer

225 Brae Boulevard  
Park Ridge, NJ 07656

March 19, 2008