

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117308

Entity Name: SHORT TERM RENTALS, INC.

FILED
May 27, 2009
Secretary of State

Current Principal Place of Business:

256 NW 118 DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

10143 WHITE WATER LILLY WAY
BOYNTON BEACH, FL 33437

Current Mailing Address:

256 NW 118 DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

10143 WHITE WATER LILLY WAY
BOYNTON BEACH, FL 33437

FEI Number: 14-1976100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTES, CHRISTOPHER
256 NW 118 DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

CORTES, CHRISTOPHER
10143 WHITE WATER LILLY WAY
BOYNTON BEACH, FL 33437 US

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: CHRISTOPHER CORTES

05/27/2009

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: D () Delete
Name: CORTES, CHRISTOPHER
Address: 256 NW 118 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CORTES, CHRISTOPHER
Address: 10143 WHITE WATER LILLY WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP () Change (X) Addition
Name: FORDE, SOLIS
Address: 9221 ANDORA DR
City-St-Zip: MIRAMAR, FL 33025

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: CHRISTOPHER CORTES

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05/27/2009

Electronic Signature of Signing Officer or Director

Date