

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000098500

Entity Name: MH RENTALS, INC.

FILED  
Apr 12, 2012  
Secretary of State

**Current Principal Place of Business:**

710 S. 50TH STREET  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

5114 GLADE FERN CT  
SARASOTA, FL 34238

**New Mailing Address:**

FEI Number: 45-3818161

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KHLEIF, COLLEEN  
5114 GLADE FERN CT  
SARASOTA, FL 34238 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KHLEIF, COLLEEN  
Address: 5114 GLADE FERN CT  
City-St-Zip: SARASOTA, FL 34238 US

Title: VP  
Name: KHLEIF, COLLEEN  
Address: 5114 GLADE FERN CT  
City-St-Zip: SARASOTA, FL 34238 US

Title: T  
Name: KHLEIF, COLLEEN  
Address: 5114 GLADE FERN CT  
City-St-Zip: SARASOTA, FL 34238 US

Title: S  
Name: KHLEIF, COLLEEN  
Address: 5114 GLADE FERN CT  
City-St-Zip: SARASOTA, FL 34238 US

I hereby 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 all other like empowered.

SIGNATURE: COLLEEN KHLEIF

PRES

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date