## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

## **FILED** Jan 21 1998 8:00am

	1998	DIVISION OF CO	ORPORATIONS	_ Secretary	or State
DOCUMENT # P9400001021 (2)  ROBERTS' RENTALS OF PASCO, INC.					
			· · · · · · · · · · · · · · · · · · ·		
Principal Place of Business Mailing Address					
3654 ELK GROVE COURT LAND O'LAKES FL 34639 LAND O'LAKES FL 34639				DO NOT WRITE IN TH	IŜ SPACE
				3. Date Incorporated or Qualified	
				01/04/1994	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt.	# etc	Suite, Apt. #, etc.		59-3221163	Not Applicable \$8.75 Additional
22	r, etc.	27	•	5. Certificate of Status Desired	Fee Required
City & State	<del></del>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	9. Name and Address of Currer		30	Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
ALD	AL, JON L	it Hogistered Agent	81 Name	10, Hame and Address of New Hegistere	- Agent
	EAST MERIDIAN AVE.		0 0	(DO D. N	
SUITE 315			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
DADE CITY FL 33525			83		
			84 City		. 85 Zip Code
				F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
agent. I ar	n familiar with, and accept the obliga	ations of, Section 607.0505, Flori	da Statutes.		, pp
SIGNATURE	Signature, typed or printed name of registered age	on and title if applicable (NOTE:	Registered Agent signature regul	red when reinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TIME		Change Addition
NAME	ROBERTS, JEFFREY W		1.2 NAME		
STREET ADDRESS	3654 ELK GROVE COURT		1.3 STREET ADORESS		
CITY-ST-ZIP	LAND O'LAKES FL 34639	- Conserve	1.4 CITY - ST - ZIP		T office T August 1
TITLE	DOPEDTO GEDALDINE O	☐ DELETE	2.1 TITLE		Change
NAME	ROBERTS, GERALDINE S 3654 ELK GROVE COURT		2.2 NAME		
STREET ADDRESS CITY - ST - ZIP	LAND O'LAKES FL 34639		2.3 STREET ADDRESS 2. 4 GITY-ST-ZIP		İ
TITLE	D 1115 C D 111110 1 L 0 1000	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 YITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		}
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		المستعدد الم	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	The state of the s		6.4 CITY-ST-ZIP	Section 110 07/21/0 Storida Statutos I further	andifuther the information

Intereoy ceruly that the information supplied with this litting does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

labell REQUESTRUBERS