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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400063355 (9)

FLORIDA MAT RENTAL, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt #, etc.

SIGNATURE:

22

Mailing Address

2a. Mailing Address

27

Suite, Apt. #, etc.

3850 N. CAUSEWAY BLVD., SUITE 1770 METAIRIE, JEFFERSON PARISH LA 70002 3850 N. CAUSEWAY BLVD., SUITE 1770 METAIRIE, JEFFERSON PARISH LA 70002

FILED Jan 21 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Applied For

\$8.75 Additional

Fee Required

Not Applicable

08/25/1994

72-1277728

5. Certificate of Status Desired

4. FEI Number

City & State		City &	City & State				6. 8	Election Campaign Financing		\$5.	.00	Иау Ве	
23		28					Trust Fund Contribution				Fees		
Zip	Country	Zip	_	_ Country	untry		8. 1	This corporation owes or has pair	d the cur	rent yea	ır Inta	ngible	
24	25 29 30			<u> </u>				Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 81 Name													
CT CORPORATION SYSTEM						Name		_					
1200 S. PINE ISLAND ROAD					2 Street Address (P.O. Box Number is Not Acceptable)								
PLANTATION FL 33324										· · ·			
					33								
				84	1-	City				85	Zip C	ode	
									FL		2.50	-	
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.													
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
12.	Signature, typed or printed name of registered agent at OFFICERS AND D		ole. (NOTE: R	egistered Ag	ent	signature required		einstating) DDITIONS/CHANGES TO OFFICI		DIDEC	TOPS	101.13	
TITLE	P ON ICERS AND L	JINEO TORG	DELETE	1.1 TITLE	_			BETTONS/CHANGES TO CIFTOI	ING AND	Char		Addition	
NAME	LATIOLIAS, RONALD			1.2 NAME		Ì							
STREET ADDRESS	3850 N. CAUSEWAY BLVD., SUITE 1770				ET ADDRESS								
	METAIRIE LA 70002			-									
CITY-ST-ZIP TITLE	VP	···········	DELETE	1.4 CITY-5 2.1 TITLE	51-	-ZIP				Chai	nae	Addition	
NAME	BALLANTINE, WM. THOMAS			2.2 NAME		ĺ					igo		
STREET ADDRESS	3850 N. CAUSEWAY BLVD., SUI	TE 1770		2.3 STREE		nnpece							
GITY-ST-ZIP	METAIRIE LA 70002			2. 4 CITY-									
TITLE	1		DELETE	3.1 TITLE	31-	20		·····		Char	nde	Addition	
NAME	HARDEY, MATTHEW W			3.2 NAME							•		
STREET ADDRESS	3850 N. CAUSEWAY BLVD., SUI	TE 1770		3.3 STREET		DDRESS							
CITY-ST-ZIP	METAIRIE LA 70002			3.4. CITY -		· · · · · · · · · · · · · · · · · · ·							
TITLE	S		DELETE	4.1 TITLE	<u> </u>			-		☐ Char	nge	Addition	
NAME	KEATING, EDAH			4. 2 NAME									
STREET ADDRESS	3850 N. CAUSEWAY BLVD., SUI	TE 1770		4.3 STREET	T AE	DDRESS							
CITY-ST-ZIP	METAIRIE LA 70002			4.4 CITY-5	ST-	ZIP ([
TITLE	CB		DELETE	5.1 TITLE						Char	nge	Addition	
NAME	COLE, JAMES D			5.2 NAME								i	
STREET ADDRESS	3850 N. CAUSEWAY BLVD., SUI	TE 1770		5.3 STREET	T AC	DORESS						J	
CITY-ST-ZIP	METAIRIE LA 70002			5.4 CITY - 9	ST-	ZIP							
TITLE			DELETE	6.1 TITLE						Char	nge	Addition	
NAME				6.2 NAME									
STREET ADDRESS			ļ	6.3 STREET	T AC	DORESS						ł	
CITY-ST-ZIP				6.4 CITY-5									
14. I hereby co	ertify that the information supplied with ton this annual report or supplemental ar	this filing do	es not qualify for the	he exemp	otic	on stated in Se	ection	119.07(3)(i), Florida Statutes. I fo	urther ce	tify that	the in	nformation	
moreated (in may arithed report of appliemental st	muai report	ים ווכב מוות שַּכַכָּעוצ	ne and ill	ici L	my signature	- orian	tieve nie sanie lečaj eneci sa ii i	i due une	וומט ויטוני	ı, ural	ग्वास्था	