## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 31, 2005 08:00 AM **DOCUMENT # P95000047610 Secretary of State** 1. Entity Name THE TRAILER RENTAL GROUP, INC. Principal Place of Business Mailing Address 11924 FORREST HILL BLVD., SUITE 22-282 11924 FORREST HILL BLVD., SUITE 22-282 WEST PALM BEACH, FL 33414 WEST PALM BEACH, FL 33414 01272005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0590742 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BRASWELL, STEVE DO NOT WRITE 11924 FORREST HILL BLVD., SUITE 22-282 WEST PALM BEACH, FL 33414 IN THIS SPACE 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** Signature, typed or primed name of registered event and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE 1\$ \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME BRASWELL, STEVE STREET ADDRESS 11924 FORREST HILL BLVD., SUITE 22-282 CITY-ST-ZIP WEST PALM BEACH, FL 33414 \_\_\_\_U00000205883 01/31/05-80062-022 150.00 TITLE BRASWELL, W.M. STEVEN NAME STREET ADDRESS 11924 FORREST HILL BLVD., SUITE 22-282 CITY-ST-ZIP WEST PALM BEACH, FL 33414 TITLE NAME. BRASWELL, DAVID P STREET ADDRESS 11924 FOREST HILL BLVD STE 22-282 DO NOT WRITE CITY-ST-ZIP WEST PALM BCH, FL 33414 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CRY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE: \_

TITLE MANUE STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF MODERS OFFICER OR DIRECTOR