2007 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT-# P95000065359

1. Entity Name
ABC TENT RENTAL, INC.



FILED Jan 17, 2007 08:00 AM Secretary of State

Principal Place of Business

140 RIFLE RANGE RD WINTER HAVEN, FL 33880 Mailing Address

P.O. BOX 128 EAGLE LAKE, FL 33839-0128



01032007

No Chg-P

CR2E034 (11/05)

FEI Number
 59-3336338

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALDWIN, RANDY 140 RIFLE RANGE RD WINTER HAVEN, FL 33880

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	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printipo name of registered agent and title	DOOT Decolors	Àtnat-va	rog lead when roungleton)	DATE	
	Signature, typed or printed name of registered agent and title	ari applicable (NOTE: registered	Agent signature	required when reinstating)	DAIL	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Finance Trust Fund Contributions	cing	\$5.00 May Be Added to Fees	000000589308	
10.	OFFICERS AND DIRE	CTORS			01/10/01.00017 000 120*12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALDWIN, RANDY PO BOX 128 EAGLE LAKE, FL 33839					
TITLE NAME STREET ADDRESS CITY+ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-02

Daytime Phone #