


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 11, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P95000097370**  
 1. Entity Name  
**A & I RENTAL SALES & SERVICE CO.**



Principal Place of Business      Mailing Address  
**6257 147TH AVE NORTH**      **P.O. BOX 1641**  
**CLEARWATER, FL 33760 US**      **LARGO, FL 33779-1641**

**DO NOT WRITE IN THIS SPACE**



04062005    No Chg-P    CR2E034 (10/03)

4. FEI Number  
**59-3355250**      Applied For  
 Not Applicable

5. Certificate of Status Desired        **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**AKINS, GARY**  
**3746 136TH AVE N**  
**LARGO, FL 33771**

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILES, ANDREZ J 1621 W WASHINGTON AVE CLEARWATER, FL 34615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT AKINS, GARY 3746 136TH AVE N LARGO, FL 33773
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gary Akins*      4/8/05      (727) 524-8959  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone