2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000038442

1. Entity Name

RCL EQUIPMENT RENTAL, INC.

Principal Place of Business

C/O MIRANDA J. LOURDES 2200 SOUTHWEST 97TH AVENUE MIAMI, FL 33165 Mailing Address

C/O MIRANDA J. LOURDES 2200 SOUTHWEST 97TH AVENUE MIAMI, FL 33165

FILED Apr 16, 2007 08:00 All Secretary of State



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01162007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0748990 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GALLO, CARMEN 9572 SW 57 ST. MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	purpose of changing its registered office	ce or registered agent, or b	oth, in the State of Floric	la. I am familiar with, an	id accept
,SIGNATURE_	Signature typed or printed name of registered agent and title	of applicable (NOTE Registered Agents	signature required when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Flection Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	900
10. TITLE NAME SIREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD MIRANDA, ROBERTO 2200 SW 97 AVE MIAMI, FL 33165	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MIRANDA, LOURDES J 2200 SW 97 AVE MIAMI, FL 33165)00707015)7-80057-018	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MIRANDA, ROBERTO 2200 SW 97 AVE MIAMI, FL 33165		DO	NOT WE	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MIRANDA, LOURDES J 2200 SW 97 AVE MIAMI, FL 33165		IN	THIS SPA	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				٠	·	
TITLE NAME STREET ADDRESS				* ***		

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

STONATURE AND TYPED OR PRINTED NAME OF SIGNING OF

dourdes J. Miranda

01-16-07 305026 835

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