

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90170 043 ***150.00

DOCUMENT # P97000038989

1. Entity Name
RENT SMART, INC.



Principal Place of Business
**442 WEST KENNEDY BLVD., SUITE 220
TAMPA, FL 33606**

Mailing Address
**442 WEST KENNEDY BLVD., SUITE 220
TAMPA, FL 33606**

50035459



2. Principal Place of Business

3808 GUNN Hwy

3. Mailing Address

3808 GUNN Hwy

Suite, Apt. #, etc.

Suite D

Suite, Apt. #, etc.

Suite D

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33618

Country

Zip

33618

Country

04062005

Chg-P

CR2E034 (10/03)

4. FEI Number
59-3445637

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BARNETT, JAMES A
442 WEST KENNEDY BLVD., SUITE 220
TAMPA, FL 33606**

7. Name and Address of New Registered Agent

Name **Same**

Street Address (P.O. Box Number is Not Acceptable)

3808 GUNN Hwy

Suite D

City **Tampa**

FL

Zip Code

33618

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/6/05

DATE

**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 **PS** ☐ Delete
NAME **BARNETT, JAMES A**
STREET ADDRESS **13821 CYPRESS VILLAGE CIRCLE**
CITY-ST-ZIP **TAMPA, FL 33624**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **Tampa, FL 33618**

TITLE ☐ Change ☒ Addition
NAME **Vice President**
STREET ADDRESS **Peter J. Barnett**
CITY-ST-ZIP **4128 Dellbrook Dr. Tampa, FL 33624**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **Peter Barnett Vice President**

4-6-05

Date

813-264-9800 x103

Daytime Phone #