2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P9900041076

1. Entity Name

PLANT CITY LEASING FOR HIRE, INC.



FILED Apr 14, 2008 08:00 Al Secretary of State

| TOS. ARDEN NAYS BLVD TO SUBSTITUTE PLANE OF THE STORY TO SUBSTITUTE PLANE OF THE STORY TO SUBSTITUTE PLANE OF THE SUBSTITUT | Propoinal Plac | a of Business | 2 | Maulina Address | • | 1 | | | | | | | |
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| PLANT CITY FL 33966 | Principal Place of Business | | | Mailing Address | | | | | | | | | |
| 2. Principal Place of Business - No P.O. Bits in 2. Monthing Autoresis 5. Month April 4 (10.07) 5. Month 5. Month 5. Month April 4 (10.07) 7. Month and Address of Current Registered Agent 7. Name and Address of Current Registered Agent 7. Name and Address of Name Agent Address of Current Registered Agent 7. Name and Address of Name Agent Address of Current Registered Agent 7. Name and Address of Name Agent Agent Agent Name Agent Agent Name Agent N | | | .vb | | | | | | | | | | |
| City & State | Principal Place of Business - No P.O. Box # 3. Mailing Address | | | | | | | 1181 | | | E E 4 16 E 7 1 | a alijaai yi isai | |
| Zp | Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | 1st MOORE CR2E034 (10/07) | | | | | |
| Country Coun | City & State | | | City & State | | | | 4. FE! Number 59-3574535 | | | | | |
| Name | Ζιρ | | Country | Zip | Zip Country | | | 5. Certificate | e of Status Desire | ed 🗆 | | | |
| Name | 6. Name and Address of Current | | | egistered Agent | | | | 7. Name and Address of New Registered Agent | | | | | |
| 134 BRIGHTWATER DR #2 CLEARWATER FL 33767 City FL Zip Codu- | | | | | | Name | | • | | | | | |
| 8. The above named entity submits this statement for the purpose of changing is registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE: NOW III: FEE: IS\$ 150.00 B. File Entitle in any date. FILE: NOW III: FEE: IS\$ 150.00 B. File Entitle | 134 | BRIGHTV | VATER DR #2 | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| The above named entry submits his statement for the purpose of changing its registered affice or registrered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent. SIGNATURE SI | CLE | WUAAW E | IR FL 33/0/ | | | | | | | | | | |
| Signature Sign | | | | City | | | | F | L Zip C | ode | | | |
| The Now Fee S S S S S S S S S | 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. | | | | | | | | | | | | |
| After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. DV | | | | | | | | | | | | | |
| 10. OFFCERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. | After May 1, 2008 Fee Will Be \$550.00 | | | | | | | | | | | | |
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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: 4

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.10.08

727-804-6137