


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 02, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000046020**  
1. Entity Name  
INTRASTATE RENTALS, INC.



Principal Place of Business      Mailing Address  
918 ROOSEVELT AVE      918 ROOSEVELT AVE  
LEHIGH ACRES, FL 33972      LEHIGH ACRES, FL 33972

**DO NOT WRITE IN THIS SPACE**



01062005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**65-0920918**      Not Applicable

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

6. Name and Address of Current Registered Agent  
  
STUMBO, DARRYL  
918 ROOSEVELT AVE.  
LEHIGH ACRES, FL 33972

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IN THIS SPACE**

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	P
NAME	STUMBO, DARRYL V
STREET ADDRESS	918 ROOSEVELT AVE
CITY-ST-ZIP	LEHIGH, FL 33972
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000285626  
04/02/05-80053-008 150.00

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IN THIS SPACE**

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 in all other like empowered.

SIGNATURE: *Darryl V. Stumbo*      Date: 3/31/05      Daytime Phone #: 239-332-7223  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR