


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

5/3.

**FILED**  
**Jun 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91045 001 \*\*\*158.75

DOCUMENT # K54671  
 1. Entity Name  
 NEFF RENTAL, INC.



Principal Place of Business 3750 NW 87TH AVE SUITE 400 ATTN: JACK SITES MIAMI, FL 33178 US	Mailing Address 3750 NW 87TH AVE SUITE 400 ATTN: JACK SITES MIAMI, FL 33178 US
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**DO NOT WRITE IN THIS SPACE**

01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0160403	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 CORPORATE CREATIONS NETWORK, INC.  
 11380 PROSPERITY FARMS ROAD # 221E  
 PALM BEACH GARDENS, FL 33410

**DO NOT WRITE 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 Mallita Diaz Assistant Secretary DATE 6/2/04

Signature, typed or printed name of registered agent and his/her applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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	DP MAS, JUAN CARLOS 3750 NW 87TH AVE MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/T IRION, MARK 3750 NW 87TH AVE., SUITE 400 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAS, JORGE 3155 NORTHWEST 77TH AVENUE MIAMI, FL 33122
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCHIEWE, STEVE 3750 NW 87 AVE SUITE 400 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE 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, with all other like empowered.

SIGNATURE: Mark Irion CEO DATE: 4/24/02 DAYTIME PHONE: 305-513-3358

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #