

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000006219

FILED
Mar 15, 2007
Secretary of State

Entity Name: NEFF CORP.

Current Principal Place of Business:

3750 NW 87TH AVE
SUITE 400
MIAMI, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

3750 NW 87TH AVE
SUITE 400 ATTN: JACK SITES
MIAMI, FL 33178 US

New Mailing Address:

FEI Number: 65-0626400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD
#221 E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAS, JUAN CARLOS
Address: 3750 NW 87TH AVE SUITE 400
City-St-Zip: MIAMI, FL 33178

Title: ST () Delete
Name: IRION, MARK
Address: 3750 NW 87TH AVE
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: SCHIEWE, STEVEN
Address: 3750 NW 87TH AVE SUITE 400
City-St-Zip: MIAMI, FL 33178

Title: DC () Delete
Name: MAS, JORGE
Address: 3155 NW 77 AVE
City-St-Zip: MIAMI, FL 33122

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: MAS, JUAN CARLOS
Address: 3750 NW 87TH AVE SUITE 400
City-St-Zip: MIAMI, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HITCHNER, DOUG
Address: 492 BROOME STREET
City-St-Zip: NEW YORK, NY 10013

Title: D (X) Change () Addition
Name: FLICK, JAMES
Address: 3750 NW 87 AVENUE SUITE 400
City-St-Zip: MIAMI, FL 33178

Title: D () Change (X) Addition
Name: HOPKINS, WILLIAM
Address: 3750 NW 87 AVENUE SUITE 400
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK IRION

S/T

03/15/2007

Electronic Signature of Signing Officer or Director

_____ Date