

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J37936

FILED
Jan 03, 2007
Secretary of State

Entity Name: COMPUTER PARTS OF AMERICA, INC.

Current Principal Place of Business:

601 W HILLSBOROUGH AVE.
TAMPA, FL 336031303 US

New Principal Place of Business:

Current Mailing Address:

601 W HILLSBOROUGH AVE.
TAMPA, FL 336031303 US

New Mailing Address:

FEI Number: 59-2728384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, EUGENE LOUIS
6205 SANDERS DR
TAMPA, FL 33611 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: PC () Delete
Name: WELLS, EUGENE L SR.
Address: 6205 SANDERS DR.
City-St-Zip: TAMPA, FL

Title: VD () Delete
Name: HUBBARD, DAVID RAY,
Address: 2306 TEXAS AVE
City-St-Zip: TAMPA, FL

Title: STD () Delete
Name: WELLS, LINDA LEE,
Address: 6205 SANDERS DR.
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: WELLS, EUGENE L SR.
Address: 6205 SANDERS DR.
City-St-Zip: TAMPA, FL 33611 US

Title: VD (X) Change () Addition
Name: HUBBARD, DAVID RAY,
Address: 2306 TEXAS AVE
City-St-Zip: TAMPA, FL 33629

Title: STD (X) Change () Addition
Name: WELLS, LINDA LEE,
Address: 6205 SANDERS DR.
City-St-Zip: TAMPA, FL 33611 US

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: GENE WELLS

CEO

01/03/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date