


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2006 8:00 am
Secretary of State

05-01-2006 90405 007 ***150.00

DOCUMENT # P02000054128
 1. Entity Name
ACTION AUTO SALES AND RENTAL, INC.



Principal Place of Business Mailing Address
1420 42ND ST NW **1420 42ND ST NW**
WINTER HAVEN, FL 33881 **WINTER HAVEN, FL 33881**


2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

66018304



04242006 Chg-P CR2E034 (11/05)

4. FEI Number
75-3060758 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

WRIGHT, EUNICE
1420 42ND ST NW
WINTER HAVEN, FL 33881

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when revealing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> Delete
NAME	WRIGHT, EUNICE	
STREET ADDRESS	140 MIRROR LAND NW	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	VS	<input type="checkbox"/> Delete
NAME	WRIGHT, THOMAS	
STREET ADDRESS	140 MIRROR LAND NW	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Wright, Thomas	
STREET ADDRESS	140 Mirror Lane NW	
CITY-ST-ZIP	Winter Haven, FL 33881	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gregory T. Wright	
STREET ADDRESS	140 Mirror Lane NW	
CITY-ST-ZIP	Winter Haven, FL 33881	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Eunice W. Wright *Eunice Wright* 4/26/06 863/968-1874

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

ATTACHMENT

66018304

June 5, 2006

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL-32314

Subject: P02000054128

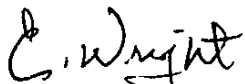
Dear Sir:

I am replying to your letter of May 18, 2006. Enclosed is a duly signed annual report.

Thank you for your attention in this matter.

Very truly yours,

ACTION AUTO SALES & RENTAL, INC.



Eunice Wright
President

Enclosure