

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V73591

FILED  
Apr 13, 2011  
Secretary of State

**Entity Name:** PERFORMANCE TRANSMISSION AND AUTO REPAIR, INC.

**Current Principal Place of Business:**

36258 U.S. HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

36258 U.S. HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684

**New Mailing Address:**

FEI Number: 59-3150474

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOUNTAS, JAMES  
36258 U.S. HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FOUNTAS, JAMES  
Address: 36258 U.S. HGHWY. 19 N.  
City-St-Zip: PALM HARBOR, FL

Title: S  
Name: CARONE, MICHAEL B.  
Address: 36258 U.S. HGHWY. 19 N.  
City-St-Zip: PALM HARBOR, FL

I hereby 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 all other like empowered.

SIGNATURE: MIKE CARONE

PRES

04/13/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date