


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 24, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 409797</b> 1. Entity Name PALM TRUCK CENTERS, INC.	
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Principal Place of Business 2441 S. STATE RD. 7#441 FT. LAUDERDALE, FL 33317	Mailing Address 2441 S. STATE RD. 7#441 FT. LAUDERDALE, FL 33317
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01162007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1402487	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

WEIGER, VICTOR  
 2441 S. STATE RD. 7#441  
 FT LAUDERDALE, FL 33317

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U00000600800 01/26/07-80025-025 150.00
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**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP DEMERS, DEBORAH 2441 S. STATE RD. 7#441 FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WEIGER, VICTOR 2441 S. STATE RD. 7#441 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEIGER, DAVID A 2441 S.STATE RD.7,#441 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE 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:** *Victor Weiger* 1/18/07 9545843200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #