


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000003397
 1. Entity Name
 AM-PAC TIRE DIST. INC.



Principal Place of Business
 9960 N. PALOFOX
 PENSACOLA, FL 32534

Mailing Address
 51 MORELAND RD
 SIMI VALLEY, CA 93065

DO NOT WRITE IN THIS SPACE



03032006 No Chg-P CR2E034 (11/05)

4. FEI Number
 95-4709076 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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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: *Andrew Top* (NOTE: Registered Agent signature required when reinstating)
 Signature typed or printed name of registered agent and title if applicable

DATE: 3/13/06

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 | DPCE |
| NAME | MANGOLA, DENNIS |
| STREET ADDRESS | 51 MORELAND ROAD |
| CITY-ST-ZIP | SIMI VALLEY, CA 93065 |
| TITLE | SCFO |
| NAME | SMITH, RICHARD W |
| STREET ADDRESS | 51 MORELAND ROAD |
| CITY-ST-ZIP | SIMI VALLEY, CA 930651662 |
| TITLE | V |
| NAME | ROBINSON, RICHARD E |
| STREET ADDRESS | 51 MORELAND ROAD |
| CITY-ST-ZIP | SIMI VALLEY, CA 930651662 |
| TITLE | DC |
| NAME | TANASHIMA, TORU |
| STREET ADDRESS | 51 MORE LAND RD |
| CITY-ST-ZIP | BIRMINGHAM, AL 35303 |
| TITLE | V |
| NAME | ABERNETHY, RICHARD |
| STREET ADDRESS | 917 6TH AVE. |
| CITY-ST-ZIP | BIRMINGHAM, AL 35303 |
| TITLE | V |
| NAME | ABERNETHY, JOHN P |
| STREET ADDRESS | 917 6TH AVE. |
| CITY-ST-ZIP | BIRMINGHAM, AL 35303 |

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 03/24/06-80014-022 158.75

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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: *Andrew Top* (NOTE: Registered Agent signature required when reinstating)
 Signature typed or printed name of signing officer or director

DATE: 3/13/06 Debarre Prior: POS-581-1311