

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03517

FILED
Jan 17, 2006
Secretary of State

Entity Name: MURPHY'S TRUCK REBUILDING SERVICE, INC.

Current Principal Place of Business:

2916 NORTH MIAMI AVENUE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

2916 NORTH MIAMI AVENUE
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-2055725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, DONALD A.
4367 NE 22ND AVE
FT LAUDERDALE, FL 33308 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: P () Delete
Name: MURPHY, DONALD A MR.
Address: 4367 COUNTRY CLUB DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: VP () Delete
Name: HOLLINGSWORTH, JENNIFER M MRS.
Address: 740 CULPEPPER TERRACE
City-St-Zip: DAVIE, FL 33325 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JENNIFER HOLLINGSWORTH

VP

01/17/2006

Electronic Signature of Signing Officer or Director

Date