

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13079

Entity Name: PERFORMANCE AUTO ACCESSORIES, INC.

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

1310 NEW WARRINGTON RD.
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:
1310 NEW WARRINGTON RD.
PENSACOLA, FL 32506

New Mailing Address:
10200 N LOOP RD
PENSACOLA, FL 32507

FEI Number: 59-2073612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRELL, MERLIN JAMES
1310 NEW WARRINGTON RD.
PENSACOLA, FL 32506 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: PTD () Delete
Name: PRELL, MERLIN J
Address: 10200 N. LOOP RD.
City-St-Zip: PENSACOLA, FL 32507

Title: SD () Delete
Name: PRELL, KYLE R
Address: 2820 CHRISTINE ST.
City-St-Zip: PENSACOLA, FL 32507

Title: VD () Delete
Name: PRELL, SALLY
Address: 10200 N. LOOP RD.
City-St-Zip: PENSACOLA, FL 32507

Title: VD () Delete
Name: PRELL, THERESA
Address: 296 FREEDOM LANE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: PRELL, SALLY F
Address: 10200 N. LOOP RD
City-St-Zip: PENSACOLA, FL 32507

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 exemption stated in Section 119.07(3)(i), 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: SALLY F PRELL

SD

04/23/2005

Electronic Signature of Signing Officer or Director

Date