

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13079

FILED
Jan 22, 2008
Secretary of State

Entity Name: PERFORMANCE AUTO ACCESSORIES, INC.

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:

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

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

Title: VD (X) Change () Addition
Name: DUNAHOO, THERESA
Address: 10200 NORTH LOOP RD.
City-St-Zip: PENSACOLA, FL 32507

I hereby certify that the information supplied with this filing does not qualify 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: MERLIN J. PRELL

PTD

01/22/2008

Electronic Signature of Signing Officer or Director

Date