

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F62916

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: AUTO KOOL DISTRIBUTORS, INC.

## Current Principal Place of Business:

2053 N STATE RD 7  
MARGATE, FL 33063

## New Principal Place of Business:

2001 N STATE ROAD 7  
MARGATE, FL 33063

## Current Mailing Address:

2053 N STATE RD 7  
MARGATE, FL 33063

## New Mailing Address:

2001 N STATE ROAD 7  
MARGATE, FL 33063

FEI Number: 59-2153210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLLINS, JUDITH  
2053 NORTH STATE ROAD 7  
MARGATE, FL 33063 US

## Name and Address of New Registered Agent:

COLLINS, JUDITH  
2001 N STATE ROAD 7  
MARGATE, FL 33063 US

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:

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: COLLINS, JOHN,  
Address: 2053 N STATE ROAD 7  
City-St-Zip: MARGATE, FL

Title: PD ( ) Delete  
Name: COLLINS, JUDITH,  
Address: 2053 N STATE ROAD 7  
City-St-Zip: MARGATE, FL

Title: VP ( ) Delete  
Name: MADISON, WILLIAM  
Address: 2053 N. STATE ROAD 7  
City-St-Zip: MARGATE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition  
Name: COLLINS, JOHN,  
Address: 2001 N STATE ROAD 7  
City-St-Zip: MARGATE, FL

Title: PD (X) Change ( ) Addition  
Name: COLLINS, JUDITH,  
Address: 2001 N STATE ROAD 7  
City-St-Zip: MARGATE, FL

Title: VP (X) Change ( ) Addition  
Name: MADISON, WILLIAM  
Address: 2001 N STATE ROAD 7  
City-St-Zip: MARGATE, FL

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: JUDY COLLINS

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date