

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081861

FILED
Apr 24, 2006
Secretary of State

Entity Name: FLA. DIESEL / TRUCK & TRAILER REPAIR INC.

Current Principal Place of Business:

4709 CRUMP RD.
UNIT 17-20
LAKE HAMILTON, FL 33851

New Principal Place of Business:

3650 DUNDEE ROAD
WINTER HAVEN, FL 33884

Current Mailing Address:

P.O. BOX 832
LAKE HAMILTON, FL 33851

New Mailing Address:

FEI Number: 59-0670018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHIDDEN, INGRID G
4550 TANNER RD.
HAINES CITY, FL 33844 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: DP () Delete
Name: WHIDDEN, FRANK C JR
Address: 4550 TANNER RD.
City-St-Zip: HAINES CITY, FL 33844

Title: DST () Delete
Name: WHIDDEN, INGRID G
Address: 4550 TANNER RD.
City-St-Zip: HAINES CITY, FL 33844

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: FRANK C WHIDDEN JR

DP

04/24/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date