## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000056656

Entity Name: ONSITE LUBE, INC.

City-St-Zip:

JACKSONVILLE, FL 32259 US

FILED Feb 10, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
SUITE #4	TRIBUTION A\		#203	8725 YOUNGERMAN CT #203 JACKSONVILLE, FL 32244		
JACKSON	IVILLE, FL 322	56	JACKSON			
Current M	lailing Addres	s:	New Mail	New Mailing Address:		
PO BOX 8 FLEMING	028 ISLAND, FL 32	2006				
FEI Number:	: 59-3723577	FEI Number Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	d Address of	New Registered Agent:	
1701 MOS	A, MARIO R IS CREEK DR PARK, FL 320	03 US	2521 TALI	MONTOYA, MARIO R 2521 TALL CEDARS RD. ORANGE PARK, FL 32003 US		
	named entity s e of Florida.	submits this statement for the	purpose of changing	its registered	office or registered agent, or both,	
SIGNATURE:				02/10/2006		
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () MONTOYA, MAI 1701 MOSS CR ORANGE PARK	EEK DRIVE	Title: Name: Address: City-St-Zip:	MONTOYA, N 2521 TALL C		
Title: Name: Address: City-St-Zip:	KARLSON, GRA 1324 HOLMES		Title: Name: Address: City-St-Zip:	KARLSON, G 1324 HOLME		
Title: Name: Address: City-St-Zip:	D () HARLAMON, PE 132 FOREST R WATERBURY, 0	DGE ROAD	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address:	D () WIESE, WILLIA 104 IVY LAKES		Title: Name: Address:	(	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: WILLIAM A. WIESE SR. D 02/10/2006