2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPES OR PROTED HAME OF SIGNATURE DESIGNATION

Apr 17, 2006 8:00 am Secretary of State DOCUMENT # P01000118987 1. Entity Name 04-17-2006 90367 008 ***150.00 TOTAL TRUCK PARTS, INC. Principal Place of Business Mailing Address 6515 SOUTHERN BLVD 350H TALL PINES RD 40000--WEST PALM BEACH, FL 33413 WEST PALM BEACH, FL 33413 2. Principal Place of Business 3. Mailing Address 6545WAL Suite, Apt. #. etc. Suite, Apt. #, etc. 03242006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For West Palm Bon lest 01-0552789 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KARON, MARC A 12122 QUERCUS LN Street Address (P.O. Box Number is Not Acceptable) WELLINGTON, FL 33414 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Storage t and the II applicable (NOTE: Registered Agent signature required when reinstrains) \$5.00 May Be FiLE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. · OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Chance NAME KARON, MARC NAME STREET ADDRESS 12122 QUERCUS LANE STREET ADDRESS CITY-ST-ZIP WELLINGTON, FL 33414 CRY-ST-ZIP SD TILE ☐ Delete TITLE Addition ☐ Change NAME WILCOSKY, JOHN B HALE STREET ADDRESS 12122 QUERCUS LANE #101 STREET ADDRESS CTTY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP VD TITLE Detete TITLE ☐ Change ☐ Addition NAME E. THOMAS FITZPATRICK NAME STREET ADDRESS 12122 QUERCUS LANE STREET ADDRESS CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP TITLE TD Delete TITLE ☐ Change Addition Addition NAME GIBSON, THOMAS NAME STREET ADDRESS 12122 QUERCUS LANE STREET ADORESS CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change MALAF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7/P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with applications. With all other like empowered.

FILED

4/14/06 561-6843332