


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 8:00 am
Secretary of State


04-18-2007 90153 035 ***150.00

DOCUMENT # P01000118987 1. Entity Name TOTAL TRUCK PARTS, INC.	
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Principal Place of Business 6545 WALLIS ROAD WEST PALM BEACH, FL 33413	Mailing Address 6545 WALLIS ROAD WEST PALM BEACH, FL 33413
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DO NOT WRITE IN THIS SPACE

40066390



04102007 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0552789	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KARON, MARC A
12122 QUERCUS LN
WELLINGTON, FL 33414

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KARON, MARC 12122 QUERCUS LANE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILCOSKY, JOHN B 12122 QUERCUS LANE #101 WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD E. THOMAS FITZPATRICK 12122 QUERCUS LANE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GIBSON, THOMAS 12122 QUERCUS LANE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 an address with all other like empowered.

SIGNATURE:  Marc A Karon President 4-13-07 561-684-3332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #