

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 20, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000011026  
 1. Entity Name  
 AUTOWORX TIRE AND AUTOMOTIVE INC.



Principal Place of Business      Mailing Address  
 3616 GULF BREEZE PKWY.      3616 GULF BREEZE PKWY.  
 GULF BREEZE, FL 32561-3525      GULF BREEZE, FL 32561-3525

**DO NOT WRITE IN THIS SPACE**



04022006    No Chg-P    CR2E034 (11/05)

4. FEI Number 26-0004944	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 BLOCKER, DAN  
 3616 GULF BREEZE PKWY.  
 GULF BREEZE, FL 32561-3525

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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: *Daniel Blocker*      V.P.O.      DATE: 4/17/06  
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, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

1100000519821  
 05/02/06-80070-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BLOCKER, DANIEL
STREET ADDRESS	3616 GULF BREEZE PKWY
CITY-ST-ZIP	GULF BREEZE, FL 32563
TITLE	VP
NAME	BLOCKER, LISA M
STREET ADDRESS	3616 GULF BREEZE PKWY
CITY-ST-ZIP	GULF BREEZE, FL 32563
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Daniel Blocker*      DATE: 4/17/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #