


**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.	
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Principal Place of Business 3616 GULF BREEZE PKWY. GULF BREEZE, FL 32561-3525	Mailing Address 3616 GULF BREEZE PKWY. GULF BREEZE, FL 32561-3525
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04022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 26-0004944	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BLOCKER, DAN 3616 GULF BREEZE PKWY. GULF BREEZE, FL 32561-3525

**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 <u><i>Dan Block</i></u> V.P. <u><i>V.P.</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE <u>4/17/06</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000519821 05/02/06-80070-005 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLOCKER, DANIEL 3616 GULF BREEZE PKWY GULF BREEZE, FL 32563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLOCKER, LISA M 3616 GULF BREEZE PKWY GULF BREEZE, FL 32563
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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: <u><i>Dan Block</i></u> <u>4/17/06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>4/17/06</u> Daytime Phone #