

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018952

FILED
Apr 13, 2006
Secretary of State

Entity Name: AJAX TOTAL PACKAGE DETAILING & FLEET SERVICE, INC.

Current Principal Place of Business:

535 NW 23RD AVE
FT LAUDERDALE, FL 33311

New Principal Place of Business:

<UNUSED>
FT LAUDERDALE, FL 33311

Current Mailing Address:

PO BOX 8852
FORT LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 30-0100364 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONE, GORDON
535 NW 23RD AVE
FT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

CONE, GORDON
821 NW 14 WAY
FT LAUDERDALE, FL 33311 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

04/13/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CONE, GORDON
Address: 535 NW 23RD AVE
City-St-Zip: FT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: CONE, GORDON
Address: 821 NW 14 WAY
City-St-Zip: FT LAUDERDALE, FL 33311

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.

SIGNATURE: GORDON CONE

Electronic Signature of Signing Officer or Director

PSTD

04/13/2006

Date