2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000114371

1. Entity Name

ENGINE OUTLET AND ACCESORIES INC



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business

5730 SW 25TH ST.

BAY #5

HOLLYWOOD, FL 33023

Mailing Address

5730 SW 25TH ST.

BAY #5

HOLLYWOOD, FL 33023



DO NOT WRITE IN THIS SPACE

04132007	No Chg-P	CR2E034 (11/05)	

5. Certificate of Status Desired

58.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ORREL, GREEN R 3565 NW 86TH WAY APT # 304 SUNRISE, FL 33351

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	named entity submits this statement for the plans of registered agent	ourpose of changing its registered office or registered ag	gent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	If applicable (NOTE, Registered Agent signature required when it	einstailing) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 and Trust Fund Contribution.	
10.	OFFICERS AND DIREC	CTORS	
TITLE	P		
NAME	ORREL, GREEN R		
CINCLI ADODICE	SC 2565 NNA GCTU NAV ADT#204		

SUNRISE, FL 33351 City-St-ZiP VΡ TITLE BOYD, RICHARD NAME STREET ADDRESS 2848 SW 129 AVE. CITY-\$1-21P MIRAMAR, FL 33027 HILE NAME STREET ADDRESS CITY-ST-ZIP THEE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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U00000748966 05/18/07-80005-001 150.00

12. Thereby certify that the information supplied with this filling 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:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/07

aytime Phone #