


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000023170</b> 1. Entity Name PERFORMANCE EQUIPMENT AND SUPPLIES, INC.	
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Principal Place of Business 1307 ISLEWORTH CT ROYAL PALM BCH, FL 33411	Mailing Address 1307 ISLEWORTH CT ROYAL PALM BCH, FL 33411
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DO NOT WRITE IN THIS SPACE



03122007 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2316978	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

PALMER, DOUGLAS A  
1307 ISLEWORTH CT  
ROYAL PALM BCH, FL 33411

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	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	D PALMER, DOUGLAS A 1307 ISLEWORTH CT ROYAL PALM BCH, FL 33411
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U00000672902  
03/29/07-80007-020 158.75

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:** Douglas A. Palmer **3/12/07** **561 790-7576**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #