

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000093536

Entity Name: TOTAL FLEET CARE INC

FILED
Jul 12, 2005
Secretary of State

Current Principal Place of Business:

9803 CREEKFRONT RD.
1207
JACKSONVILLE, FL 32256

Current Mailing Address:

9803 CREEKFRONT RD.
1207
JACKSONVILLE, FL 32256

New Principal Place of Business:

10000 GATE PARKWAY N.
#417
JACKSONVILLE, FL 32246

New Mailing Address:

PO BOX 18544
JACKSONVILLE, FL 32229

FEI Number: 20-1276968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERRA, IRIS D
9803 CREEKFRONT RD
APT # 1207
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

GUERRA, IRIS D
10000 GATE PARKWAY N.
417
JACKSONVILLE, FL 32246 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:

07/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GUERRA, IRIS D
Address: 9803 CREEKFRONT RD APT # 1207
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GUERRA, IRIS D
Address: 10000 GATE PARKWAY N.
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: IRIS GUERRA

PRES

07/12/2005

Electronic Signature of Signing Officer or Director

Date