2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033202

Entity Name: ALLIED WHEEL REPAIR SERVICES, INC.

FILED Mar 23, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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9736 QUAIL HOLLOW BLVD PENSACOLA, FL 32514 9736 QUAIL HOLLOW BLVD PENSACOLA, FL 32514 UN

Current Mailing Address: New Mailing Address:

9736 QUAIL HOLLOW BLVD PENSACOLA, FL 32514

FEI Number: 20-2424966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FORST, PETER M 9736 QUAIL HOLLOW BLVD PENSACOLA, FL 32514 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 Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: FORST, PETER M

Address: 9736 QUAIL HOLLOW BLVD City-St-Zip: PENSACOLA, FL 32514 UN

Title: VP

Name: FORST, ALLISON V
Address: 9736 QUAIL HOLLOW BLVD
City-St-Zip: PENSACOLA, FL 32514

Title: TRES

 Name:
 FORST, ALLISON V

 Address:
 9736 QUAIL HOLLOW BLVD

 City-St-Zip:
 PENSACOLA, FL 32514

Title: SEC

Name: FORST, ALLISON V
Address: 9736 QUAIL HOLLOW BLVD
City-St-Zip: PENSACOLA, FL 32514

Title: CFO

Name: FORST, PETER M
Address: 9736 QUAIL HOLLOW BLVD
City-St-Zip: PENSACOLA, FL 32514

Title: DIRE

Name: FORST, PETER M

Address: 9736 QUAIL HOLLOW BLVD City-St-Zip: PENSACOLA, FL 32514

I hereby 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 all other like empowered.

SIGNATURE: ALLISON V FORST VP 03/23/2012