2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000159134

Entity Name: TWIN CAM AUTOMOTIVE, INC

Current Principal Place of Business:	**New Principal Place of Business:**

7230 ATLANTIC BLVD.
JACKSONVILLE, FL 32211

Current Mailing Address:	**New Mailing Address:**

2657 LANTANA LAKES DR E
JACKSONVILLE, FL 32246

FEI Number: 20-3957760   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:**

ESPINOZA, PAUL R
2657 LANTANA LAKES DR E
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: _____

          Electronic Signature of Registered Agent   Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:	P	( ) Delete	Title:		( ) Change ( ) Addition
Name:	ESPINOZA, PAUL R		Name:		
Address:	2657 LANTANA LAKES DR E		Address:		
City-St-Zip:	JACKSONVILLE, FL 32246 US		City-St-Zip:		

Title:	VP	( ) Delete	Title:		( ) Change ( ) Addition
Name:	ESPINOZA, PAUL E		Name:		
Address:	2657 LANTANA LAKES DR E		Address:		
City-St-Zip:	JACKSONVILLE, FL 32246 US		City-St-Zip:		

Title:	S	( ) Delete	Title:		( ) Change ( ) Addition
Name:	BYRNES, MICHAEL R		Name:		
Address:	1674 HUDDERFIELD CIRCLE EAST		Address:		
City-St-Zip:	JACKSONVILLE, FL 32246		City-St-Zip:		

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: PAUL R ESPINOZA   P   05/24/2006
_____   _____
          Electronic Signature of Signing Officer or Director   Date