2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000027797

SHAMROCK AUTO EXCHANGE, INC.



Principal Place of Business

2005 REID STREET PALATKA, FL 32177 Mailing Address

2005 REID STREET PALATKA, FL 32177

FILED Apr 26, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04212007 No Chg-P

4. FEI Number 59-3248568

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LASTINGER, LAWTON

DO NOT WRITE

2005 REID STREET PALATKA, FL 32177			IN THIS SPACE		
	named entity submits this statement for the plans of registered agent.	urpose of changing its register	ed office or registered agent, or both,	in the State of Florida. I am familiar with, and acce	
SIGNATURE_	Signature, typed or printed name of registered agent and title is	if applicable (NOTE Register	ed Agent signature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution			
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD LASTINGER, LAWTON C 2005 REID ST PALATKA, FL 32177				
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TITLE NAME STREET ADDRESS CITY-SY-ZIP				U00000733597	

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR