


2007 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 27, 2007 8:00 am
Secretary of State

04-09-2007 90061 046 ***150.00

DOCUMENT # P96000022657					
1. Entity Name PRO-TECH AUTOMOTIVE OF PASCO, INC.					
Principal Place of Business 11905 OAK TRAIL WAY PORT RICHEY, FL 34668 US			Mailing Address 11905 OAK TRAIL WAY PORT RICHEY, FL 34668 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3367885	
				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 TINKER, GARY 11905 OAK TRAIL WAY PORT RICHEY, FL 34668			7. Name and Address of New Registered Agent Name: Anthony FERRO Street Address (P.O. Box Number is Not Acceptable): 11905 OAK TRAIL WAY City: Port Richey FL Zip Code: 34668		
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: <i>Anthony Ferro</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE: _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TINKER, GARY 11905 OAK TRAIL WAY PORT RICHEY, FL 34668 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Pres. Anthony Ferro 8040 Saybrook Dr. Port Richey, FL 34668 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <i>Anthony Ferro</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date: _____ Daytime Phone: _____					

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