2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 8:00 am Secretary of State

	MEN I # P9600003	942			20		•	02-20-2006	90026 01	4 ***158.	75	
1. Entity Nam CARL'S S	BPEED SHOP, INC.											
Principal Place of Business			Mailing Address						,			
390 NORTH BEACH STREET DAYTONA BEACH, FL 32114			390 NORTH BEACH STREET DAYTONA BEACH, FL 32114					61	00185	i63		
		. •										
2. Principal Place of Business			3. Mailing Address			· ·						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				02132006	Chg-P	CR2E	034 (11/05)		
City & State			City & State				4. FEI Number 59-338				plied For at Applicable	
Zip	Country	Z	Zip Count			5. Certificate of Status Desired See Required Fee Required					litional	
6. Name and Address of Current			Registered Agent			7. Name and Address of New Registered Agent						
					Name							
MORROW, CARL 390 NORTH BEACH STREET DAYTONA BEACH, FL 32114						Street Address (P.O. Box Number is Not Acceptable)						
DATIONA	NBEACH, FL 32114		•									
					City				FL	Zip Code	e	
	named entity submits this statement ions of registered agent.	for the p	urpose of changing its	register	ed office or	register	ed agent, or bo	th, in the State of F	lorida. I am	familiar with,	and accept	
SIGNATURE.	Signature, typed or printed name of registered age	nt and title if	applicable. (NOTE	E: Registere	d Agent signatur	re required	when reinstating)		DATE			
 				•								
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550		Election Campai Trust Fund Conti	-	ncing 🗆	\$5. Adde	00 May Be ed to Fees					
10.	OFFICERS AN	O DIREC		11.			ADDITIONS	CHANGES TO OF	FICERS AN			
TITLE	D CARL		☐ Delete	TITL						☐ Change	☐ Addition	
NAME STREET ADDRESS	MORROW, CARL 390 NORTH BEACH STREET			NAM STRE	ET ADDRESS							
CITY-ST-ZIP	DAYTONA BEACH, FL 32114				-ST-ZIP							
TATLE	D		☐ Delete	TITL	E					☐ Change	Addition	
NAME	MORROW, DIANE			NAM	E							
STREET ADDRESS	390 NORTH BEACH STREET				ET ADDRESS							
CITY-ST-ZIP	DAYTONA BEACH, FL 32114				-\$T-ZIP	10.20	Descit	J			\	
TITLE			☐ Delete	TITLI		MICE My Ar	Preside	Carl C	oua	Change	Addition	
STREET ADDRESS	* *	• •		~ *	ET ADDRESS	390	north	Beach	Street	-	-	
CITY-ST-ZIP					-ST-ZIP	Ďαμ	itona 136	.'Beach 'each, FL	32114			
TITLE			☐ Delete	TiTL	E					☐ Change	Addition	
NAME				NAM								
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -St-zip							
			Пан.							☐ Change	CT Addition	
TITLE NAME			☐ Delete	TITLI						C cuange	Addition	
STREET ADDRESS					ET ADDRESS							
CITY-ST-ZIP					-ST-ZIP							
TITLE			☐ Delete	TITL	E					☐ Change	☐ Addition	
NAME				NAM								
STREET ADDRESS					ET ADDRESS							
CITY-ST-ZIP	costile that the information are the first	ith thin 41	ing days not qualify to		-ST-ZIP	notalood	Lin Chantor 116	Elorida Statutas	I further co	rdifu that the !	nformation	
iz. inereby	certify that the information supplied w	ant with th	any dues not quasty to	א נווכ כא	さいけいりゅう たく	or wall IEA	m Chapter 118	z, i londa Statutes.	Charles CE	tory trical frie is	monnation	

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.