


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000078049 1. Entity Name TONY'S AUTO CENTER, INC.	
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Principal Place of Business 1888 CANOVA ST SE PALM BAY, FL 32909	Mailing Address 1888 CANOVA ST SE PALM BAY, FL 32909
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DO NOT WRITE IN THIS SPACE



04252007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3598063	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ARNO, ANDREW P ARNO FINANCIAL SERVICES, INC. 1601 AIRPORT BLVD STE 2 W MELBOURNE, FL 32904
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**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CANUP, GARY 538 HOLMES AVE NW PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STEELE, GARY 915 SARETA ST SE PALM BAY, FL 32909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CANUP, LAURA 538 HOLMES AVE NW PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STEELE, BARBARA 915 SARETA ST NE PALM BAY, FL 32909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000760636
05/25/07-80023-018 150.00

**DO NOT WRITE
IN THIS SPACE**

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: 	4-30-07 321 726-5929
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone</small>