


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 17, 2006 8:00 am
Secretary of State

07-17-2006 90139 046 ***150.00

DOCUMENT # P99000107462 1. Entity Name RANDY'S AUTO SPECIALIST, INC.	
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Principal Place of Business 1834 N. GOLDENROD ROAD ORLANDO, FL 32807	Mailing Address 1834 N. GOLDENROD ROAD ORLANDO, FL 32807
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent HARRISON, RICHARD R 7530 LIZANNE CT. ORLANDO, FL 32807	DO NOT WRITE IN THIS SPACE
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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: Richard R Harrison Dec 7/14/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HARRISON, RICHARD R 7530 LIZANNE CT ORLANDO, FL 32807	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HARRISON, JOHNNIE C 7530 LIZANNE CT ORLANDO, FL 32807	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		

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: [Signature] 7/14/06 407-0816760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #