

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # S81165 1. Entity Name LOPRESTI SPEED MERCHANTS, INC.	
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Principal Place of Business 2620 AIRPORT N. DR VERO BEACH, FL 32960 US	Mailing Address 2620 AIRPORT N. DR VERO BEACH, FL 32960 US
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DO NOT WRITE IN THIS SPACE



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0295298	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LOPRESTI, CURT 2620 AIRPORT NORTH DRIVE VERO BEACH, FL 32960	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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

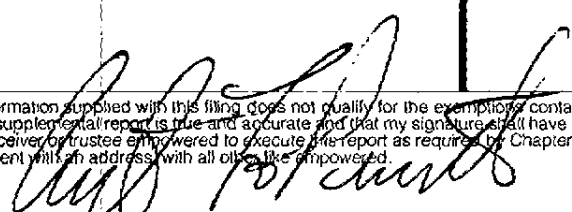
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOPRESTI, JAMES R. 5670 36TH LN VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPRESTI, CURT 906 TIDES ROAD VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOPRESTI, CURTIS 906 TIDES ROAD VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOPRESTI, MARGARET 516 HONEYSUCKLE LN VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOPRESTI, DAVID 469 10TH CT. VERO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

U00000396741
01/30/06-80020-023 317.50

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: 	1-20-06	772-562-4757
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #