


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P27009
 1. Entity Name
INDUSTRIAL TRACTOR PARTS CO., INC.



Principal Place of Business
28-15 14TH STREET
LONG ISLAND CITY, NY 11102

Mailing Address
28-15 14TH STREET
LONG ISLAND CITY, NY 11102



04232006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-1848999 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BELCHER, DOUGLAS
8686 PHILLIPS HWY
JAX, FL 32256

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 _____ (NOTE: Registered Agent signature required when re-instating) 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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD DANA, MAURICE 28-15 14TH STREET LONG ISLAND, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DANA, MICHEL 28-15 14TH STREET LONG ISLAND, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD DANA, ERNA 28-15 14TH STREET LONG ISLAND, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DANA, ROBERT 28-15 14TH STREET LONG ISLAND, NY
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

UDDDU0547654
 05/12/06-80034-004 150.00

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **V.P.** **04/26/06**
 _____ Date _____ Daytime Phone # _____