2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 412073

Address:

City-St-Zip:

Name: IMPORT USED AUTO PARTS INC.

FILED Mar 27, 2008 Secretary of State

Entity Nai	me: IMPORT	USED AUTO PARTS, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
P.O.BOX	OLONIAL DR 27157), FL 3282022					
Current Mailing Address:			New Mailing Address:			
PO BOX 5 ORLANDO	31172), FL 32853					
FEI Number: 59-1424513 FEI Number Applied For () FI		FEI Number Not Appl	Number Not Applicable () Certificate of Status Desired ()			
Name and	Address of (Current Registered Agent:	Name and Address of New Registered Agent:			
	AUL M. CKASAW TR), FL 32825	US				
	named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Age	nt	Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (BURNS, PAUL 1438 CHICASA ORLANDO, FL		Title: Name: Address: City-St-Zip:	,	() Change () Addition	
Title: Name: Address: City-St-Zip:	MYERS, ERIC	CARLOS STREET	Title: Name: Address: City-St-Zip:	MYERS, ERI	CARLOS STREET	
Title: Name: Address: City-St-Zip:	VP (YOUNG, RON 9987 SHAWDO ORLANDO, FL		Title: Name: Address: City-St-Zip:	MYERS, ERI	CARLOS STREET	
Title: Name:	() Delete	Title: Name:	T MYERS, ERI	()Change(X)Addition C L	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: PAUL M BURNS P 03/27/2008

3219 W. SAN CARLOS STREET

TAMPA, FL 33629