

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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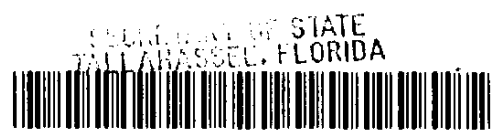
PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 99 FEB -3 PH 12:17

DOCUMENT # G09857
 1. Corporation Name
INTEURO PARTS DISTRIBUTORS, INC.



Principal Place of Business: 9970 NW 89 CT, MEDLEY FL 33178, US
 Mailing Address: 9970 NW 89 COURT, MEDLEY FL 33178, US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/24/1982
 4. FEI Number: 59-2283788 Applied For Not Applicable
 5. Certificate of Status Desired: [] \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax: [] Yes [] No
 10. Name and Address of New Registered Agent

2. Principal Place of Business (21-24) and Mailing Address (2a-30) fields with sub-fields for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
SCHIGIEL, LEON
 9970 NW 89 COURT
 MEDLEY FL 33178

81 Name: RON WHITE
 82 Street Address (P.O. Box Number is Not Acceptable): 9970 NW 89TH CT.
 83
 84 City: MEDLEY FL 85 Zip Code: 33178

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.1507, Florida Statutes.

SIGNATURE: *Ronald White* 1/22/99

12. OFFICERS AND DIRECTORS

TITLE	V	DELETE
NAME	BICK, JOSEPH	
STREET ADDRESS	9970 NW 89TH CURT	
CITY-ST-ZIP	MEDLEY FL	
TITLE	P	DELETE
NAME	SCHIGIEL, LEON	
STREET ADDRESS	9970 NW 89TH COURT	
CITY-ST-ZIP	MEDLEY FL	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	[] Change	[X] Addition
12 NAME	RON WHITE		
13 STREET ADDRESS	9970 NW 89TH CT.		
14 CITY-ST-ZIP	MEDLEY, FL 33178		
21 TITLE	T	[] Change	[X] Addition
22 NAME	JOHN PALUMBO		
23 STREET ADDRESS	9970 NW 89TH CT		
24 CITY-ST-ZIP	MEDLEY, FL 33178		
31 TITLE	S	[] Change	[X] Addition
32 NAME	JAMES LOCKWOOD		
33 STREET ADDRESS	9970 NW 89TH CT.		
34 CITY-ST-ZIP	MEDLEY, FL 33178		
42 NAME	800002770728-2		
43 STREET ADDRESS	-02/09/99 - 01131--010		
44 CITY-ST-ZIP	****150.00 ****150.00		
51 TITLE		[] Change	[] Addition
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE		[] Change	[] Addition
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald White* 1/22/99

CR2E034 (11/98)