2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State
01-17-2003 90132 005 ***150.00

DOCUMENT # P02000070514

1. Entity Name
QUALITY AFTERMARKET PARTS, INC.

Principal Place of Business	Mailing Address
ROUTE 1 BOX 675 LAKE CITY FL 32055	ROUTE 1 BOX 675 LAKE CITY FL 32055

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4894 NW Highway 41	4894 NW Highway 41
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lake City Florida	City & State: Lake City Fl 32055
Zip: 32055 Country: USA	Zip: 32055 Country: USA

4. FEI Number: 59-3304005 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BULLOCK, STEPHEN C 116 NW COLUMBIA AVE LAKE CITY FL 32055	Name: McKenzie, Randy Street Address (P.O. Box Number is Not Acceptable): 4894 NW Highway 41 City: Lake City **FL** Zip Code: 32055

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: x Randy McKenzie
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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCKENZIE, RANDY ROUTE 1 BOX 675 LAKE CITY FL 32055	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD McKenzie, Randy 21274 330 Road Lake City Florida	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Metzger, Bill 20425 330 Drive Wellborn, Florida 32094	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Vought, Linda S 6754 County Road 248 O'Brien, Fl 32071	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Randy McKenzie SIGNATURE REQUIRED RANDY MCKENZIE 1-3-03 386-754-6486
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)