

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025731

FILED
Apr 09, 2005
Secretary of State

Entity Name: AMERICAN PARTS CORPORATION

Current Principal Place of Business:

7085 NW 173RD DR., #405
MIAMI LAKES, FL 33015

New Principal Place of Business:

8346 NW SOUTH RIVER DR
BAY M
MIAMI, FL 33166

Current Mailing Address:

7085 NW 173RD DR., #405
MIAMI LAKES, FL 33015

New Mailing Address:

8346 NW SOUTH RIVER DR
BAY M
MIAMI, FL 33166

FEI Number: 45-0504563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARCANO, MARIA
7085 NW 173RD DR., #405
MIAMI LAKES, FL 33015 US

Name and Address of New Registered Agent:

MARCANO, MARIA
11456 NW 48 TERRACE
DORAL, FL 33178 US

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.

SIGNATURE:

04/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARCANO, MARIA
Address: 7085 NW 173RD DR., #405
City-St-Zip: MIAMI LAKES, FL 33015

Title: VD () Delete
Name: CHACON, HUGO
Address: 7085 NW 173RD DR., #405
City-St-Zip: MIAMI LAKES, FL 33015

Title: SD () Delete
Name: CHACON, ROBIN
Address: 7085 NW 173RD DR., #405
City-St-Zip: MIAMI LAKES, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARCANO, MARIA
Address: 11456 NW 48 TERRACE
City-St-Zip: DORAL, FL 33178

Title: VD (X) Change () Addition
Name: CHACON, HUGO
Address: 11456 NW 48 TERRACE
City-St-Zip: DORAL, FL 33178

Title: SD (X) Change () Addition
Name: CHACON, ROBIN
Address: 11456 NW 48 TERRACE
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: MARIA MARCANO

PD

04/09/2005

Electronic Signature of Signing Officer or Director

Date