

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000069516

1. Entity Name
EXPRESSWAY USED AUTO PARTS, INC.



Principal Place of Business
**3975 118TH AVE NORTH
CLEARWATER, FL 33762 US**

Mailing Address
**9968 119TH WAY N
SEMINOLE, FL 33772**

DO NOT WRITE IN THIS SPACE



08092004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3268323	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**COHN, RONALD B
705 W AZEELE ST
TAMPA, FL 33606**

**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 _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	OP RUBENSTEIN, RICHARDS S 9968 119TH WAY N SEMINOLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S RUBENSTEIN, JOAN 9968 119TH WAY NORTH SEMINOLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V RUBENSTEIN, RICHARD M. 9968 119TH WAY NORTH SEMINOLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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08/18/04-80004-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-14-04 727 3923609
Date Daytime Phone #