

**FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S47138

1. Entity Name
BARBARA USED AUTO-PARTS, INC.



Principal Place of Business
4655 NW 36 AVE
MIAMI, FL 33142 US

Mailing Address
4655 NW 36 AVE
MIAMI, FL 33142 US

FILED

2008 MAR 11 AM 7:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02-08-08 90039 041 A 8.75
01252007 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-0251833 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, SONIA
4655 NW 36 AVE
MIAMI, FL 33142

**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: SONIA FERNANDEZ

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

NOTE: Registered Agent signature required when reinstating

01/27/07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/T FERNANDEZ, SONIA 4655 NW 36 AVE MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MP/S AMARILYS MARTIN 8030 NW 103 STREET HIALEAH, FL 33015
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, 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:

SONIA FERNANDEZ

Sonia Fernandez 01/27/07 (305) 633-2278

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Date

Telephone #