$\alpha$
Ť
•
_
A
~
$\sim$
Щ
C
Ω
_

FILE	E NOW: FILING FEE AI	FTER MAY 1ST IS	\$550.00		(. <u>1.</u>
	PROFIT RPORATION UAL REPORT	Katherii Secretar	RTMENT OF STATE  ne Harris  y of State	Light Street	)
···	1999	DIVISION OF C	CORPORATIONS	99 AUG -6 P	1112: 02
DOCU 1. Corporation	MENT # 300 LUX			arton with t	e o constati
,	Parts House, Inc.			SEGNOWAY TATLAHUSSER,	"FLORIOA
Principal Plac	no of Ducinose	Mailing Address	<b> </b>	20000295	52625
Principal Place of Business Mailing Address  8383 Baycenter Road				-08/10/9901017019 ****50.00 ****550.00  DO NOT WRITE IN THIS SPACE	
	sonville, FL	32216		3. Date Incorporated or Qualified FLORIDA	IS SPACE
	Place of Business 3 Brycenter Road #, etc.	2a. Mailing Address 26 8383 Say Suite, Apt. #, etc.	center Ruad	4. FEI Number 59 - 129 1014  5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional
22 City & Sta	le	City & State		6 Flection Campaign Financing	Fee Required \$5.00 May Be
23 Jack Zip	SOAVILLE, FL Country	28 Jacksonville	Country	Trust Fund Contribution	Added to Fees
24 322		29 32216	30 DUVAC	This corporation owes the current year I     Personal Property Tax.      Name and Address of New Registere	∐Yes [.]No
832,	ch, David 3 Bay Center Road Leonville, FC 32256		81 Name 82 Street Add 83	dress (P.O. Box Number is Not Acceptable)	
			84 City	F	85 Zip Code
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	f Florida. Such change was au	s, the above-named corp thorized by the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appears	of changing its registered
office or i	registered agent, or both, in the State of am familiar with, and accept the obligation	f Florida. Such change was au ons of, Section 607.0505, Flori	s, the above-named corp thorized by the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the app	of changing its registered
office or agent. I a SIGNATURE	registered agent, or both, in the State or am familiar with, and accept the obligation of signature, typed or printed name of registered agent.  OFFICERS AND	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) D DIRECTORS	s, the above-named corporation of the corporation o	poration submits this statement for the purpose of ion's board of directors. I hereby accept the app	L
office or agent. I a SIGNATURE  12. TITLE	registered agent, or both, in the State of am familiar with, and accept the obligation of signature, typed or printed name of registered agent.  OFFICERS AND PRESIDENT & PIRCOTO	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) D DIRECTORS	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L
office or agent. I a SIGNATURE	registered agent, or both, in the State of am familiar with, and accept the obligation of the property of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) D DIRECTORS	s, the above-named corporated by the corporated Statutes Registered Agent signature require 13. 1.1 TITLE 12 NAME	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L
office or a agent. I a SIGNATURE  12. TITLE NAME	registered agent, or both, in the State of am familiar with, and accept the obligation of the property of the company of the c	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L
office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state o	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes.  Registered Agent signature require  13.  1.1 TITLE  12 NAME  1.3 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L
office or agent. I a SIGNATURE  12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	PRESIDENT A DIRCCTO PRESIDENT A DIRCCTO PAUL LEHR 20 RIVER RD BOSOTA, NJ 07603 PRESIDENT A DIRCCTO PAUL LEHR DOGOTA, NJ 07603 PRESIDENT DAVID HONG	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE  DELETE	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-57-ZIP  21 TITLE  22 NAME	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   District of changing its registered of changing its registered of the change of th
office or agent. I a SIGNATURE  12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state o	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE  DELETE	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   District of changing its registered of changing its registered of the change of th
office or agent. I a SIGNATURE  12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	PRESIDENT OFFICERS AND PRESIDENT NO OFFICERS AND PRESIDENT OFFICERS AND PRESIDENT ADJACKSONVILLE, FL	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE  DELETE  DELETE  DELETE	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-57-ZIP  21 TITLE  22 NAME	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   District of changing its registered of changing its registered of the change of th
office or agent. I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PRESIDENT OF ONE PRESIDENT OF CRESTELL OF	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE  DELETE	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dick of changing its registered of changing its registered of the continuent as registered   Dick of the change   Dick of the chan
office or agent. I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	registered agent, or both, in the State of am familiar with, and accept the obligation of familiary of familiar with a property of familiary of famil	ons of, Section 607.0505, Flori and little of applicable DIRECTORS DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	s, the above-named corporated by the corporated Statutes  Registered Agent signature require  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP  3 1 TITLE	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dick of changing its registered of changing its registered of the continuent as registered   Dick of the change   Dick of the chan
office or agent. I a signature  12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADORESS CITY-ST-ZIP	PRESIDENT OF OFFICERS AND PRESIDENT ADDRESS BAYCENTER ROBATION TO THE STATE OF THE	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dr.   D
office or agent. I a signature 12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE TITLE TITLE	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dick of changing its registered of changing its registered of the continuent as registered   Dick of the change   Dick of the chan
office or agent. I a signature  12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADORESS CITY-ST-ZIP	registered agent, or both, in the State of am familiar with, and accept the obligation of familiary of familiar with a property of familiary of famil	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dr.   D
office or agent. I a signature 12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME NAME	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dr.   D
office or agent. I a signature 12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS	registered agent, or both, in the State of am familiar with, and accept the obligation of familiary of familiar with a property of familiary of famil	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  2 4 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME  4.3 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME  4.3 STREET ADDRESS  44 CITY-ST-ZIP  51 TITLE	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	L   Dr.   D
office or agent. I a signature 12.  TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  24 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME  4.3 STREET ADDRESS  34 CITY-ST-ZIP  51 TITLE  52 NAME	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	Change Addition
office or agent. I a signature agent. I a signature 12.  Title name Street adoress city. St. Zip Title name Street adoress	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  24 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME  4.3 STREET ADDRESS  34 CITY-ST-ZIP  51 TITLE  52 NAME  53 STREET ADDRESS	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	Change Addition
office or agent. I a signature agent. I a signature 12.  Title name street adoress city. St. Zip	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  24 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME  4.3 STREET ADDRESS  34 CITY-ST-ZIP  51 TITLE  52 NAME	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	Change Addition
office or agent. I a signature agent. I a signature 12.  Title name Street adoress city. St. Zip Title name Street adoress	registered agent, or both, in the State of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of am familiar with, and accept the obligation of the state of the	f Florida. Such change was au ons of, Section 607.0505, Flori and little of applicable (NOTE) DIRECTORS  DELETE	s, the above-named corporated by the corporated Statutes  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  21 TITLE  22 NAME  23 STREET ADDRESS  24 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4. 2 NAME  4.3 STREET ADDRESS  34 CITY-ST-ZIP  51 TITLE  52 NAME  53 STREET ADDRESS  44 CITY-ST-ZIP  51 TITLE  52 NAME  53 STREET ADDRESS  54 CITY-ST-ZIP	poration submits this statement for the purpose of ion's board of directors. I hereby accept the applied when reinstating).  DATE	Change Addition

64CITY-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)(i), 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:

7/26/99

Jeffrey C. Genstel, VP+DIrector