2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 151554

1. Entity Name: PARTS DEPOT, INC.

FILED
01 APR 30 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2177 DALE AVE., S.E. ROANOKE, VA 24013	P.O. BOX 13785 ROANOKE, VA 24013

900004195269--9
-05/11/01--01029--020
****150.00 ****150.00
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 59-0570642 ☐ 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
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE: _____ DATE
Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NOBLE, MARK J. 4239 PIPPIN STREET ROANOKE, VA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CHAIRMAN OF THE BOARD DELL, GLEN 255 ARAGON AVENUE, SUITE 300 CORAL GABLES, FL 33134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS O'TOOLE, CHARLES J. 1100 HUNTINGTON BLDG. CLEVELAND, OH	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO, D OLSON, ROLLANCE E. 2177 DALE AVE., S.E. ROANOKE, VA 24013	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS HALL, DENNIS RT.3, BOX 155C VINTON, VA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NAVIA, TALBERT 255 ARAGON AVENUE, SUITE 300 CORAL GABLES, FL 33134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S,T,D STABILE, WAYNE 255 ARAGON AVENUE, SUITE 300 CORAL GABLES, FL 33134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P, COO,D ALEXANDER, WILLIAM E. 6002 CAVALIER DR. ROANOKE, VA	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS,D BERRITT, HAROLD E. 1221 BRICKELL AVENUE, 22ND FLOOR MIAMI, FL 33131	☐ Change ☒ Addition

CR2E034 (11/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 11/27/01 305-374-0876
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

01/29/2001 13:48 CCRS → 13059615466 NO.181 D11

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ROANOKE, VA 24013

Mailing Address
P.O. BOX 13785
ROANOKE, VA 24013

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Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #