FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	122/	COO W. D		BITIOIOIT OF	DOM: OF		3110					
DOCUMENT # 227813 (3) 1. Corporation Name MAJOR AUTO PARTS, INC.								ļ				212 11 1221
Deinalani Dina	o of Dunings		Mailea	d						EIRH HILL I		#1111 111
Principal Place of Business Mailing Address												
4419 N WESTSHORE BLVE TAMPA FL 33614 US			3219 SAN CARLOS ST. TAMPA FL 33629-5924 US									
									3. Date incorporated or Qualified 09/10/1959		ate of Last R 29/1996	eport
2. Principal Place of Business			2a. Mailing Address					4. FEI Number Applied For S9-0877296 Not Applicable				
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired	
City & Stat	te		City &	State		• • • • • • • • • • • • • • • • • • • •			Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	May Be
Zip	_ 	Country	Zip	~	Co	untry						
24	<u> </u>	25	- h			o in y			This corporation has liability for Florida Statutes	intangible Yes [. 199.032,
24		and Address of Curren	29 1 Registered A	cent	30	т			10. Name and Address of New R			
MVE		and readings of Opinion	t riogisteres A	.gon		81	Name	. _	TO, Hame and Address of New I	gistereu	Agont	
	RS,ERIC	IODE					1 1 1 1 1 1					
4419 N WESTSHORE						82	Street	Addres	ss (P.O. Box Number is Not Accepta	ble)		
, IAM	PA FL 3361	4				83						
						63						
						84	City				85 7ip (Code
										<u> </u>		
office or a	to the provisi registered ag	ons of Sections 607.050 ent. or both, in the State	2 and 607.1508 of Florida, Suc	3, Flerida Statu h change was	tes, the a authorize	ibove id hv	e-named the cor	d corpo rporatio	ration submits this statement for the n's board of directors. I hereby acce	purpose o of the and	f changing it pointment as	s registered registered
agent. I a	am familiar wit	th, and accept the obliga	ations of, Section	on 607.0505, Fi	orida Sta	dutes	3.	poracio	To board of anothern Prioropy Resor	pr. 1110 04 54	ZONIENONI CO	regiaterea
SIGNATURE				·								
10	Signature typed	or printed name of registered age		ble (NO			int signatur	re required	when reinstating)	DATE	DIDEOTOR	20.01.40
12.	PD	OFFICERS ANI	DIRECTORS	DELETE	13.			7	ADDITIONS/CHANGES TO OFFI	CEHS AND	Change	Addition
NAME	MYERS,EF	ol¢.		ET PERCIE				1			[] Change	LJ Addition
		VESTSHORE BLVD			12 N							
STREET ADDRESS					l.		ADDRESS					
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CITY-ST-ZIP	1				6.4 C	ITY-S	T - ZIP	1				l

14. I do 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.

SIGNATURE:

FILED

Apr 24 1997 8:00am

Secretary of State