2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 242583

FILED Oct 26, 2005 Secretary of State

Entity Name: UNIVERSAL PARTS WAREHOUSE, INC.

Current P	rincipal Plac	e of Business:	New Princ	ipal Place of Business:
P.O. BOX	RAMORE 1583 D, FL 32802			
Current Mailing Address:		New Maili	New Mailing Address:	
P.O. BOX	RAMORE 1583 D, FL 32802			
El Number	: 59-0934216	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:
. B MICHA 16 N PARI DRLANDO		US		
	named entity e of Florida.	submits this statement for the	e purpose of changing i	s registered office or registered agent, or both,
SIGNATUI	RE:			
SIGNATO				
SIGNATO	Electro	nic Signature of Registered A	gent	Date
BIGINATO	Electro	nic Signature of Registered A	gent	Date
	Electro	· ·	•	Date S/CHANGES TO OFFICERS AND DIRECTORS
DFFICER Title: Name: Address:	S AND DIREC	CTORS:) Delete _ B, MORN CT	•	
	S AND DIRECT PD (MICHAEL JR,I 3203 MISTY M ST CLOUD, FI V (MICHAEL,STE	CTORS:) Delete _ B, MORN CT -) Delete EVEN J, ED OAK CIRCLE	ADDITION Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTORS
DFFICER: itle: lame: laddress: City-St-Zip: itle: lame: laddress:	PD (MICHAEL JR,I 3203 MISTY M ST CLOUD, FI V (MICHAEL,STE 5371 CROOKI ST CLOUD, FI	CTORS:) Delete B, MORN CT) Delete EVEN J, ED OAK CIRCLE) Delete RIS H, MORN CT	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTORS () Change () Addition
DFFICER: lame: kddress: City-St-Zip: lame: kddress: city-St-Zip: Title: lame: kddress: lame: kddress:	PD (MICHAEL JR,I 3203 MISTY M ST CLOUD, FI V (MICHAEL,STE 5371 CROOKI ST CLOUD, FI S (MICHAEL,DOF 3203 MISTY M ST CLOUD, FI	CTORS:) Delete B, MORN CT) Delete EVEN J, ED OAK CIRCLE) Delete RIS H, MORN CT	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	S/CHANGES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN J. MICHAEL V 10/26/2005