2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 403093

1. Entity Name
JV AUTO PARTS CORP.

Principal Place of Business	Mailing Address
7423 S W 24TH ST	7423 S W 24TH ST
MIAMI, FL 33155	MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

01092007   No Chg-P   CR2E034 (11/05)

4. FEI Number | Applied For
59-1402094 | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

VILLARREAL, EMILIO
3825 S.W. 128TH AVENUE
MIAMI, FL 33175

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.
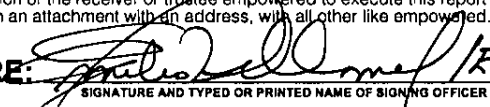
SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   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	P
NAME	VILLARREAL, EMILIO
STREET ADDRESS	3825 S.W. 128TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	S
NAME	VILLARREAL, IVONNE
STREET ADDRESS	3825 S.W. 128TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	VP
NAME	VILLARREAL, DANIEL E
STREET ADDRESS	1730 SW 93 CT.
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE-	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/16/07-80013-011 150.00

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 607, 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: _____ /Emilio Villarreal   4-3-07   (305)261-7362

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