

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

FILED
Aug 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 542964
 1. Corporation Name
Lyon's Auto Parts, Inc.

Principal Place of Business Mailing Address
6726 Pembroke Road
Pembroke Pines, FL
33023

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
08/15/1997

2. Principal Place of Business 21 3200 N. Federal Hwy.	2a. Mailing Address 26	4. FEI Number 59-1764349	Applied For Not Applicable
Suite, Apt. #, etc. 22 Suite 221A(215)	Suite, Apt. #, etc. 27	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
City & State 23 Boca Raton, FL	City & State 28	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
Zip 24 33431	Country 25 PalmBeach	29	30

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
Lyon, John M. III
6726 Pembroke Road
Pembroke Pines, FL 33023

10. Name and Address of New Registered Agent
 81 Name
John Fadden
 82 Street Address (P.O. Box Number is Not Acceptable)
3200 N. Federal Hwy
 83
Suite 221A(215)
 84 City
Boca Raton, FL 86 Zip Code
FL 33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *John Fadden* **John Fadden** **8/19/98**
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS Lyon, John M. III <input checked="" type="checkbox"/> DELETE 6726 Pembroke Road Pembroke Pine, FL 33023
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPT Lyon, Carla <input checked="" type="checkbox"/> DELETE 6726 Pembroke Road Pembroke Pines, FL 33023
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	P/S/D John Fadden <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3200 N. Federal Hwy - STE 221-A Boca Raton, FL 33431
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500002825058 -08/26/98--01026--002 ***550.00
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>Ch...</i>

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *John Fadden* **John Fadden** **8/17/98**
 Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)