

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 849658

1. Entity Name

SUPERIOR AIR PARTS, INCORPORATED

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90049 050 ***150.00

642101



DO NOT WRITE IN THIS SPACE

Principal Place of Business 14280 GILLIS ROAD DALLAS TX 75244-3792	Mailing Address 14280 GILLIS ROAD DALLAS TX 75244-3792
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 75-1253598	Applied For Not Applicable
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent CHIARIELLO, JENNIFER 5101 NW 21ST AVENUE STE 140 FT. LAUDERDALE FL 33309	7. Name and Address of New Registered Agent Name John Giles Street Address (P.O. Box Number is Not Acceptable) 5101 NW 21st Avenue Suite 140 City Ft. Lauderdale FL Zip Code 33309
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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 John Giles, Branch Manager Signature, typed or printed name of registered agent and title if applicable. Date 4-11-01 (NOTE: Registered Agent signature required when reinstating)
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9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COLEMAN, BERNIG 14280 GILLIS ROAD DALLAS TX 75244-3792 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Coleman, Bernie 14280 Gillis Road Dallas, TX 75244-3792 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOV FARLEY, JERRY 14280 GILLIS ROAD DALLAS TX 75244-3792 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOV Steve Lathan 14280 Gillis Road Dallas, TX 75244-3792 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Steve Lathan SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	4/4/01 Date	972-663-2606 Daytime Phone #
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CR2E034 (10/00)