


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

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| DOCUMENT # F07575 | |  |
| 1. Entity Name DADE CITY AUTO & EQUIPMENT PARTS, INC. | | |
| Principal Place of Business 14051 U.S. 98 BY PASS DADE CITY, FL 33525 US | Mailing Address 14051 US 98 BY-PASS DADE CITY, FL 33525 | |



03212008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 59-2055394 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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IN THIS SPACE**

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| 6. Name and Address of Current Registered Agent HENSON, JOHN E 5315 8TH STREET ZEPHRYHILLS, FL 33542 |
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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. 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

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD PLAZEWSKI, LYNN L 30985 PASCO ROAD SAN ANTONIO, FL 33576 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD PLAZEWSKI, EDWARD A. 30985 PASCO RD SAN ANTONIO, FL 33576 |
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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 the empowered.

SIGNATURE: *Edward A. Plazewski* Edward A. Plazewski *03-28-2008* 352-567-1258
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #