May 07, 1999 8:00 am Secretary of State

05-07-1999 90005 035 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **F49409**

1. Corporation Name

PACHECO DISCOUNT AUTO PARTS, INC.

						! 				
Principal Place	e of Business	Mailing Address				: 188+186 sest minta 1816; mint mil	1811 E(E(P)		410(1 0(0))	
534 E. 9TH ST. HIALEAH FL 33010 534 E. 9TH ST. HIALEAH FL 33010										
						DO NOT WRITE IN THIS SPACE				
					[3. Date Incorporated or Qualifed 10/12/1981				
Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For	
21 26						<u>59-2135645</u>			Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27						5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State City & State 23 28						6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip Country Zip 24 25 29			Country 30			8, This corporation owes the current year Intangible Personal Property Tax. ☑ Yes ☐ No				
	9. Name and Address of Currer	nt Registered Agent		,	_ 	0. Name and Address of New Ro	egistered i	Agent		
			81	Name	•					
PACHECO, JOSE F. 6880 WINGEDFOOT DR. MIAMI FL			82	Street	t Address	ddress (P.O. Box Number is Not Acceptable)				
			83	T						
				0				05 7	n Codo	
			84	City			FL	85 Zi	p Code	
SIGNATURE	m familiar with, and accept the obligation of th		Registered Age		required whe	n reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN			
TITLE	Р	☐ DELETE	1.1 TITLE			- · ·		Chang	je Addition	
NAME	PACHECO, JOSE F		1.2 NAME		1					
STREET ADDRESS	6880 WINGEDFOOT DR.		1.3 STREE	TADDRESS	s					
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP	<u> </u>				F-1 4 11%	
TITLE	S DELETE		2.1 TITLE					☐ Chang	e Addition	
NAME	PACHECO, MIRIAM		2.2 NAME							
STREET ADDRESS			2.3 STREET ADDRESS		s					
CITY-ST-ZIP	MIAMI FL		2.4 CTY-5	ST-ZIP	 -	····		Chann	n D Addition	
TITLE	•		3.1 TITLE					Chang	e Addition	
NAME	PACHECO, JOSEPH		3.2 NAME							
STREET ADDRESS	6880 WINGEDFOOT DR.			TADORESS	S					
CITY-ST-ZIP	MIAMI FL	☐ DELETE	3.4. CITY-S	ST-ZIP				Chang	ie Addition	
TITLE		☐ DETE (F	4.1 TITLE						ie Trouinoii	
NAME			4. 2 NAME							
STREET ADDRESS			1	TADDRESS	S					
CITY+ST-ZIP			4.4 CITY-S	T-ZIP	 			Chann	no [Addition	
TITLE		☐ DELETE	5.1 TITLE					Chang	je 🗌 Addition	
NAME			5.2 NAME							
STREET ADDRESS				TADDRESS	5					
CITY-ST-ZIP		[7] 6	5.4 CITY-S	ı-ZIP	 			- C		
TITLE		☐ DELETE	6.1 TITLE		1			Chang	e Addition	
NAME !			6.2 NAME		l .				:	

14. 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 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 peport 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, with all other like empowered.

6.3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Jose F. Pacheco