FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 AM 9:51

DOCUMENT # **F77192** **(5)**

1. Corporation Name
CICANESE PERFORMANCE PARTS, INC.

Principal Place of Business	Mailing Address
4080 DUNCAN RD. PUNTA GORDA FL 33982	4080 DUNCAN RD. PUNTA GORDA FL 33982

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/21/1982
3a. Date of Last Report: 01/19/1994
4. FEI Number: 18-0001227 (Applied For / Not Applicable)
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

CICANESE, JOHN
30306 HOLLY RD.
PUNTA GORDA FL 33982

10. Name and Address of New Registered Agent

81 Name: Cicanese, John
82 Street Address (P.O. Box Number is Not Acceptable): 30 3006 Holly Rd.
83
84 City: Punta Gorda FL 85 Zip Code: 33982

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 Cicanese — John Cicanese — 1-11-95
Signature (typed or printed name of registered agent and title if applicable) (If not, Registered Agent can sign for corporate officer/director) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☒ Change ☐ Addition
NAME	CICANESE, WILLIAM	12 NAME	
STREET ADDRESS	39381 WASHINGTON LOOP RD	13 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 00000	14 CITY-ST-ZIP	33982
TITLE	VT	21 TITLE	☐ Change ☒ Addition
NAME	CICANESE, JOHN	22 NAME	
STREET ADDRESS	30306 HOLLY RD.	23 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	24 CITY-ST-ZIP	33982
TITLE	S	31 TITLE	☒ Change ☒ Addition
NAME	CICANESE, BETTY E	32 NAME	Cicanese, Betty U.
STREET ADDRESS	39381 WASHINGTON LOOP RD	33 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	34 CITY-ST-ZIP	33982
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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: Betty Cicanese (Betty Cicanese) 1-11-95 813-639-2966
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED BY CORPORATION OR LIMITED PARTNERSHIP TO SIGN (Date) (Daytime Phone Number)

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