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Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90224 042 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F79122

1. Corporation Name
INTERPARTS CORPORATION

Principal Place of Business

7085 NW 46TH ST
MIAMI FL 33166
US

Mailing Address

7085 NW 46TH ST
MIAMI FL 33166
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1982

2. Principal Place of Business

21 **4448 NW 74th AVE**

Suite, Apt. #, etc.

22 **-**

City & State

23 **MIAMI, FL.**

Zip

24 **33166** 25 **USA**

2a. Mailing Address

26 **4448 NW 74th AVE**

Suite, Apt. #, etc.

27 **-**

City & State

28 **MIAMI, FL.**

Zip

29 **33166** 30 **USA**

4. FEI Number

59-2180690

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

REYES, ORLANDO E
4011 W FLAGLER ST STE 504
MIAMI FL 33134

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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 **P** ☒ DELETE
NAME **VENTO, JUAN L**
STREET ADDRESS **7085 NW 46 ST**
CITY-ST-ZIP **MIAMI, FL 00000**

TITLE **S** ☒ DELETE
NAME **VENTO, JAVIER**
STREET ADDRESS **7085 NW 46ST**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **V** ☐ DELETE
NAME **DIAZ, JOSE A**
STREET ADDRESS **12264 SW 95TH ST**
CITY-ST-ZIP **MIAMI, FL 00000**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PRESIDENT
JOSE A. DIAZ
12264 SW 95th
MIAMI-FL. 33186
VIPRES.
HUMBERTO Herrera
8521 NW 181ST
MIAMI FL 33015

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)