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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F84404

(5)

MONKS AUTO PARTS, INC.

**FILED** Feb 16 1998 8:00am Secretary of State

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D-111-D1						I CIUF BLOS BIBLI	(BU BURN BURN	BHBIJ IBBI
Principal Plac		Mailing Address						71011 1401
25 N SCENIC HWY 25 N SCENIC HWY								
FROSTPROOF FL 33843 FROSTPROOF FL 33843			DO NOT WRITE IN THIS SPACE					
					3. Date Incorporated or Qualific	ed		<del></del>
					06/08/1982			
2. Principal P	lace of Business	2a, Mailing Address			4, FEI Number		TAD	plied For
21 26				59-2197648			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	dditional
22		27			5. Certificate of Status Desired		Fee Re	quired
City & Stat	0	City & State			8. Election Campaign Financing		\$5.00	Мау Ве
23		28	<del></del>		Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Country		8. This corporation owes or has			
24	25	29	30		Personal Property Tax due J		<u> </u>	J No
	g. Name and Address of Curre	nt Registered Agent	——— <del>-</del>	04 Name	10. Name and Address of New	Registered A	gent	<del></del>
HITZING, EW				M	ONK , MARVETTE			
	33 BUFFALO AVE		[7		dress (P.O. Box Number is Not Accept			
JACKSONVILLE FL 32208			ļ.	<b>8</b> 3	5 N. SCENIC HU	<u> </u>		
			- 1'	B3				
			1	84 City	OSTPROOF	FL	85 Zip (	
11. Pursuant	to the provisions of Sections 607 056	02 and 607 1508 Florida Statu	tes the ab	ove-named co	progration submits this statement for the	ne purpose of	chenging its	843
office or r	registered agent, or both, to the State	of Florida Guch change was	authorized	by the corpor	orporation submits this statement for the ration's board of directors. I hereby ac	cept the appo	intment as	registered
	~1 X 1 X - 1 X 1 X X					04		
SIGNATURE	Signature, typed or printed name of registers au	pent and telle it applicable (NO)	VE TO	E MOA	pulred when reinstalling)	DATE	-	<del> </del>
12.	, OFFICERS AN	ID DIRECTORS	13.	<del></del>	ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 12
TITLE	VD T	DELETE	1.1 TITL	.E			Change	Addition
NAME	HITZING, E W		1.2 NAM	ME Ì				
STREET ADDRESS	5433 BUFFALO AVE		1.3 STR	EET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE, FL 00000		1.4 CIT	Y-ST-ZIP				
TITLE	TD	DELETE	2.1 TITL	.E			Change	Addition
NAME	DAVIS, RAYMOND							
STREET ADDRESS	I		2.2 NAM	AE .			•	
	5433 BUFFALO AVE			ME EET ADDRESS			·	
CITY-ST-ZIP	I		2.3 STR	i i			·	
TITLE	5433 BUFFALO AVE JACKSONVILLE, FL 00000 SD	DELETÉ	2.3 STR	EET ADDRESS Y-ST-ZIP			Change	☐ Addition
	JACKSONVILLE, FL 00000	<b>™</b> DELETE	2.3 STR 2.4 CIT	EET ADDRESS Y-ST-ZIP E		· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
TITLE	JACKSONVILLE, FL 00000 SD	<b>JZ</b> J DELETÉ	2.3 STRI 2.4 CIF 3.1 TITL 3.2 NAM	EET ADDRESS Y-ST-ZIP E		· · · · · · · · · · · · · · · · · · ·	Change	Addition
TITLE NAME	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R	<b>JZ</b> J DELETÉ	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI	EET ADDRESS Y-ST-ZIP E			Change	Addition
TITLE NAME STREET ADDRESS	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE	DELETE	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI	Y-ST-ZIP  E AE EET ADDRESS Y-ST-ZIP  Y-ST-ZIP			Change	Addition Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000		2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI 3.4. CIT	EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD		2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STRI 3.4. CHT 4.1 TITL 4.2 NAM	EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E	25 N SCENIC	Hwy		
NITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE	DELETE	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI 3.4. CHT 4.1 TITL 4.2 NAI 4.3 STRI	EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME	25 N SCENIC ( FROST PROOF , FL	Hwy		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE		2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI 3.4. CHT 4.1 TITL 4.2 NAI 4.3 STRI	EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP  EET ADDRESS Y-ST-ZIP		Hwy 1		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE	DELETE	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY	EET ADDRESS Y-ST-ZIP  AE  EET ADDRESS Y-ST-ZIP  E  ME  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E		Hwy 1	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE	DELETE	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAN 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAN	EET ADDRESS Y-ST-ZIP  AE  EET ADDRESS Y-ST-ZIP  E  ME  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E		Hwy 1	Change	Addition
TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE	☐ DELETE	2.3 STRI 2.4 CIT 3.1 TIJL 3.2 NAN 3.3 STRI 3.4 CIT 4.1 TIJL 4.2 NAI 4.3 STRI 4.4 CITY 5.1 TIJL 5.2 NAN 5.3 STRI	EET ADDRESS Y-ST-ZIP  AE  EET ADDRESS Y-ST-ZIP  E  ME  EET ADDRESS (-ST-ZIP  E  AE			Change  Change	Addition
TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE	DELETE	2.3 STRI 2.4 CIT 3.1 TIJL 3.2 NAN 3.3 STRI 3.4 CIT 4.1 TIJL 4.2 NAI 4.3 STRI 4.4 CITY 5.1 TIJL 5.2 NAN 5.3 STRI	EET ADDRESS Y-ST-ZIP  ME EET ADDRESS Y-ST-ZIP  E ME EET ADDRESS (-ST-ZIP  E EET ADDRESS (-ST-ZIP  E EET ADDRESS			Change	Addition
TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE	☐ DELETE	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAN 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAN 5.3 STRI 5.4 CITY	EET ADDRESS Y-ST-ZIP  AE  EET ADDRESS Y-ST-ZIP  E  ME  EET ADDRESS (-ST-ZIP  E  AE  EET ADDRESS (-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E			Change  Change	Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THE TADDRESS CITY-ST-ZIP TITLE	JACKSONVILLE, FL 00000 SD DAVIS, SHARON R 5433 BUFFALO AVE JACKSONVILLE, FL 00000 PD MONK,MARVETTE 5433 BUFFALO AVE	☐ DELETE	2.3 STRI 2.4 CIT 3.1 TIJL 3.2 NAN 3.3 STRI 3.4 CIT 4.1 TITL 4.2 NAI 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAN 5.3 STRI 5.4 CITY 6.1 TITL 6.2 NAN	EET ADDRESS Y-ST-ZIP  AE  EET ADDRESS Y-ST-ZIP  E  ME  EET ADDRESS (-ST-ZIP  E  AE  EET ADDRESS (-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E  EET ADDRESS (-ST-ZIP  E			Change  Change	☐ Addition

14. Thereby 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 or yet attachment with a gladdress.

SIGNATURE: