

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
Sandra H. Wharton
Secretary of State
Tallahassee, Florida

**APPROVED
AND
FILED**

95 MAY 10 AM 10:35

DOCUMENT # **F93000004445 (3)**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PARTS PURCHASING CORPORATION

(Do Not Write in This Space)

1. Name of Corporation		2a. Fiscal Year		3. Date of Report Submitted	3b. Date of Last Report
22212 COLLINGTON DRIVE BOCA RATON FL 33428		22212 COLLINGTON DRIVE BOCA RATON FL 33428		09/27/1993	05/23/1994
2. State of Incorporation	2b. Fiscal Year	4. FEI Number		Approved For	
21. FL	26. 1995	22-2105385		Not Applicable	
22. State Agent	27. State Agent	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
22. State Agent	27. State Agent	<input type="checkbox"/>		<input type="checkbox"/>	
23. City Address	28. City Address	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
23. City Address	28. City Address	<input type="checkbox"/>		<input type="checkbox"/>	
24. State Agent	25. State Agent	29. State Agent	30. State Agent	8. Does corporation have liability for intangible tax under § 119(1)(b) Florida Statutes	
24. State Agent	25. State Agent	29. State Agent	30. State Agent	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
POLA, RUDOLPH D 22212 COLLINGTON DRIVE BOCA RATON FL 33428				B1. Name	
				B2. Street Address (If No Number, Not Applicable)	
				B3. City	
				B4. State	FL
				B5. Zip Code	

11. Pursuant to the provisions of Section 119, Florida Statutes, this document is being filed with the Secretary of State for the purpose of changing its registered office or registered agent, or both, of the State of Florida. It is requested that the Department of State advise the Secretary of State of any change in the registered office or registered agent, or both, of the corporation, and that the Secretary of State advise the Department of State of any change in the registered office or registered agent, or both, of the corporation.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS	
OFFICER	CPT POLA, RUDOLPH D 22212 COLLINGTON DRIVE BOCA RATON FL 33428	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	VCS POLA, NANCY 22212 COLLINGTON DRIVE BOCA RATON FL 33428	STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STATE		STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STATE		STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STATE		STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119(1)(b), Florida Statutes. I further certify that the information included on this annual report is a true and correct statement of the financial condition of the corporation 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 and that my name is being reported to the Secretary of State as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report. If changed, or corrected, with an addendum.

SIGNATURE: *Rudolph D. Pola*
 SIGNATURE AND TITLE OR PRINTED NAME OF FILING OFFICER OR DIRECTOR
 X 5-5-95 407-852-2073
 0288630 CP