

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F98000003036

1. Entity Name
A-1 COMPONENTS CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 29 AM 8:48

Principal Place of Business

**625 WEST 18TH STREET
HIALEAH, FL 33010**

Mailing Address

**625 WEST 18TH STREET
HIALEAH, FL 33010**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

12212006

Chg-P

CR2E034 (12/06)

4. FEI Number
62-1741238

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CHMN
LOWDEN, JOHN R
140 GREENWICH AVE
GREENWICH, CT 06830** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO & SECRETARY ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
COLEMAN, JOHN
625 WEST 18TH STREET
HIALEAH, FL 33010** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**500082821425
12/28/06--01033--016 **\$1.25** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ASEC
WITHERS, MORRIS K
4520 MAIN STREET, SUITE 1100
KANSAS CITY, MO 64111** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT & ASST. SECRET
SCOTT E. HORSE
625 WEST 18TH ST.
HIALEAH, FL 33010** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP & ASST. SECR.
JOHN J. WATERS
140 GREENWICH AVE
GREENWICH, CT 06830** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP & ASST. SECR.
JOHN J. WATERS
140 GREENWICH AVE
GREENWICH, CT 06830** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP & ASST. SECR.
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JOHN R. LOWDEN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-20-06 203-863-9892

Date

Daytime Phone #