


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # H53743 1. Entity Name SOUTHERN COLLECTOR CAR PARTS, INC.	
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Principal Place of Business 3340 N US 1 FT PIERCE, FL 34946	Mailing Address 4315 S. INDIAN RIVER DR. FT PIERCE, FL 34982
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01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2538698	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PLATT, RONALD W 1303 SW CEDAR COVE PORT SAINT LUCIE, FL 34986
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**DO NOT WRITE
IN THIS SPACE**

3. 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 <i>Ronald W Platt</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE <i>1-9-07</i>

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	2. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000581913 01/11/07-80010-021 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PLATT, RONALD W 1303 SW CEDAR COVE PORT SAINT LUCIE, FL 34986
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MEITNER, STEPHEN A. 422 PENINSULA DRIVE FT PIERCE, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 is 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, who is otherwise empowered.	
SIGNATURE: <i>Ronald W Platt</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE <i>1-9-07</i> DAYTIME PHONE # <i>772-359-0466</i>