2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

H53743 **DOCUMENT #**

1. Entity Name

SOUTHERN COLLECTOR CAR PARTS, INC.



FILED Mar 03, 2003 8:00 am & Secretary of State

03-03-2003 90422 003 ***150.00

Principal Place of Business 3340 N US 1 FT PIERCE FL 34946			3340	Mailing Address 3340 N US 1 FT PIERCE FL 34946				A ARAGON ANAK DIKUD KINIK TARIK AKARA I		. 	Cicil Oldil IRO	
2. Principal	Place of Busin	ness	3. Ma	3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State				City & State			4. FEI Number 59-2538698			A	pplied For	
Zip Country			Zip		Country	5. Certificate of Status Desired			\$8.75 Additional Fee Required			
6. Name and Address of Current I				ed Agent	1	7. Name and Address of New Registered Agent					3 u	
· · · · ·						Name	<u>''-</u>	Maine and Address of New Neg	stered Ag	ent		
GILBERT,	GRAYSON	S										
407 FERNANDINA STREET				Street Address			(P.O. E	P.O. Box Number is Not Acceptable)				
	E FL 34949	ž						· · · · · · · · · · · · · · · · · · ·				
	212010	:				City			FL	Zip Cod	de	
8. The above	e named entit	v submits this statemen	t for the our	nose of changing its	registered	office or registe	rod or	gent, or both, in the State of Florida				
, the obliga	tions of regist	tered agent.	ictor the purp	ose of changing its	registered	onice or registe	neu ag	gent, or both, in the State of Florida	a. Famitar	ıllar with,	and accept	
SIGNATURE	Signature, typed	or printed name of registered ag	ent and title if app	olicable. (NOTE	E: Registered Ac	ent signature require	d when r	reinstating)	DATE			
Afte	r May 1, 200	! FEE IS \$150.00 3 Fee will be \$550.0 Florida Department			·	- <u>u</u>		Election Campaign Financ Trust Fund Contribution.	oing	\$5.0 Added	00 May Be d to Fees	
10.		OFFICERS AT	ND DIRECTO	PRS	11.		AD	L ODITIONS/CHANGES TO OFFICE	RS AND D	IRECTOR	S IN 11	
TITLE	DV			☐ Delete	TITLE					Change	Addition	
NAME	GILBERT,	GRAYSON S.			NAME				_		_	
STREET ADDRESS		ANDINA ST.			STREET A							
CITY-ST-ZIP	FT PIERCE	: FL			CITY-ST-	ZIP						
TITLE	DP	OTEDLIEN A		☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS		stephen A. Isula drive			NAME Street a	DDDECO						
CITY-ST-ZIP	FT PIERCE				CITY-ST-	1						
TITLE	ST	the second of the	·	☐ Delete	TITLE		<u>-</u> -	<u> </u>	^-	7.05		
NAME	MEITNER,	FRANK W		L. Delete	NAME				L	Change	☐ Addition	
STREET ADDRESS	1607 HISP				STREET A	DDRESS						
CITY-ST-ZIP	FT PIERCE				CITY-ST-	ZIP						
TITLE				☐ Delete	TITLE			, ,,, <u>,</u> ,,,		Change	Addition	
NAME					NAME							
STREET ADDRESS CITY-ST-ZIP					STREET A	i						
					City-St-	ZIP						
TITLE NAME				☐ Delete	TITLE] Change	☐ Addition	
STREET ADDRESS	£	4			NAME Street al	ODRESS					l	
CITY-ST-ZIP					CITY-ST-	- 1						
TITLE				☐ Delete	TITLE	 		·	- F	Change	Addition	
NAME					NAME				_			
STREET ADDRESS					STREET AL	DDRESS						
CITY-ST-ZIP					CiTY-\$T-							
12. I hereby of indicated of the corporated, changed,	certify that the on this report poration or the or on an atta	information supplied water supplied water supplier in the receiver or trustee emochanical with an address	ith this filing t is true and a powered to with all oth	does not qualify for accurate and that me execute this report a er like empowered.	the exempt y signature as required	ion stated in Se shall have the by Chapter 607	ection same I 7, Florid	119.07(3)(i), Florida Statutes. I furt legal effect as if made under oath; da Statutes; and that my name ap	her certify that I am a pears in Bl	that the in an officer o	ormation or director Block 11 if	

SIGNATURE:

RECOURMIN