

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H67686

FILED  
Nov 19, 2009  
Secretary of State

Entity Name: SUPREME AUTO PARTS OF OPA LOCKA, INC.

**Current Principal Place of Business:**

% SEGUNDO ROTELLA  
2650 ALI-BABA AVE.  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

% SEGUNDO ROTELLA  
2650 ALI-BABA AVE.  
OPA LOCKA, FL 33054

**New Mailing Address:**

FEI Number: 59-2565440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROTELLA, ISIS  
625 CADAGUA AVE  
MIAMI, FL 33146 US

**Name and Address of New Registered Agent:**

ROTELLA, ISIS  
4241 SW 16 STREET  
MIAMI, FL 33134 US

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.

SIGNATURE: ISIS ROTELLA

11/19/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROTELLA, SEGUNDO  
Address: 625 CADAGUA AVE  
City-St-Zip: MIAMI, FL 33146

Title: V ( ) Delete  
Name: ROTELLA, ISIS  
Address: 625 CADAGUA AVE  
City-St-Zip: MIAMI, FL 33146

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ROTELLA, SEGUNDO  
Address: 4241 SW 16 STREET  
City-St-Zip: MIAMI, FL 33134

Title: V (X) Change ( ) Addition  
Name: ROTELLA, ISIS  
Address: 4241 SW 16 STREET  
City-St-Zip: MIAMI, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISIS ROTELLA

V

11/19/2009

Electronic Signature of Signing Officer or Director

Date