

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 NOV -3 AM 8:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K21306**

1. Corporation Name

NATIONAL AUTO PARTS OF U.S.A., INC.

Principal Place of Business

Mailing Address

**7100 KIMBERLY BLVD.
N. LAUDERDALE FL 33068-2335**

**7100 KIMBERLY BLVD.
N. LAUDERDALE FL 33068-2335**



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

04/19/1988

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0069319

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
CP	BOYAJIAN, ZAVEN	10450 178TH COURT S	BOCA RATON FL
VP	BOYAJIAN, NOUBAR	20138 SOUTH KEY DR.	BOCA RATON FL
S	BOYAJIAN, ALINE	9177-D SW 22ND STREET	BOCA RATON FL
T	BOYAJIAN, HAROUHOUN	10450 178TH CT. S	BOCA RATON FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**BOYAJIAN, ALINE
7100 KIMBERLY BLVD.
~~2 S BISCAYNE BLVD. #3750~~
N. LAUDERDALE FL 33068**

Name

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

Suite, Apt. #, Etc.

City

980082348569-0

-11/06/97-01089-020

*****165.00 FL ***165.00**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date **10/28/97**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/28/97

Date

7847216490

Daytime Phone #

CR2040 (8/97)

NATIONAL AUTO PARTS

D/B/A Rock Island Mobil
7100 Kimberly Blvd.
North Lauderdale, FL 33068

Tel: 305-721-6490/91
Fax: 305-721-6499
Telex: 451-565 Auto Parts USA

Department of State
Division of Corporation
P.O.Box 6327
Tallahassee, FL 32314

Oct.29,1997

RE: K21306

To Whom It May Concern

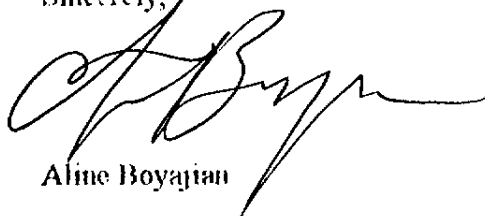
Dear Sir or Madam,

This letter is in regard our annual report filling. We apologize for the inconvenience that we may have caused you by not filling our annual report on time. We have not received any correspondence from the Department of State as a reminder to file.

Since this is our first time that we are late filling, we would appreciate if the penalties could be waived per our phone conversation.

Thank you for your immediate attention in this matter.

Sincerely,



Aline Boyajian