


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2004 08:00 AM
Secretary of State

DOCUMENT # K63134	
1. Entity Name MIAMI FOREIGN CAR PART CORP.	

Principal Place of Business 9800 NW 87TH AVE. MEDLEY, FL 33178	Mailing Address 9800 NW 87TH AVE. 8351 NW 96TH ST MEDLEY, FL 33178
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DO NOT WRITE IN THIS SPACE



01262004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0098156	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RODRIGUEZ, FRANCISCO L 8351 N.W. 96TH STREET MEDLEY, FL	DO NOT WRITE IN THIS SPACE
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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 	Francisco Rodriguez	2-5-04
<small>Signature typed or printed name of registered agent and title if applicable</small>		<small>DATE</small>

FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000064405 02/24/04-80010-020 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD RODRIGUEZ, FRANCISCO L 1650 S. TREASURE DR. NORTH BAY VILLAGE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 	<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>
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