

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K71751

1. Entity Name

E AUTO PARTS, INC.

Principal Place of Business

10441 ALTA ROAD
JACKSONVILLE FL 32226
US

Mailing Address

10441 ALTA ROAD
JACKSONVILLE FL 32226
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

HAKIMIAN, BENJAMIN S.
2626 FOREST CIRCLE
JACKSONVILLE FL 32257

Name

Street Address

City

8. The above named entity submits this statement for the purpose of changing its registered office or

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.
After MAY 1, 2001 Fee will be \$500
Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **HAKAMIAN, BAGHER**
CITY-ST-ZIP **2626 FOREST CIRCLE**
JACKSONVILLE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ben Hakimian 4/26/01 757-1975

Date

Daytime Phone #

FILED

May 10, 2001 8:00 am
Secretary of State

05-10-2001 90104 017 ***150.00



DO NOT WRITE IN THIS SPACE

Correct

ID #

59-3023846
See attached

For applicable

al

May Be Fees

CR2E034 (10/00)

Florida Division of Corporations Public Access

Corporate Inquiry Menu:

Please select an inquiry type from the list below, then enter a search key in the search field. Press **SEARCH** to begin the search.

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 - ☐ Registered Agent Name
 - ☐ Trademark Owner Name
 - ☐ FEI Number
 - ☐ Document Number
 - ☐ Trademark Name

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5/12/00

CORPORATE DETAIL RECORD SCREEN

3:38 PM

NUM: K71751

ST: FL ACTIVE/FL PROFIT

FLD: 03/10/1989

LAST: NAME CHANGE AMENDMENT

FLD: 04/23/1997

FEI#: 59-2907348

Changed to 59-302-3846

NAME: E AUTO PARTS, INC.

NH: 1

PRINCIPAL: 10441 ALTA ROAD

CHANGED: 03/29/96

ADDRESS: JACKSONVILLE, FL 32226 US

RA NAME: HAKIMIAN, BENJAMIN S.

NAME CHG: 05/10/90

RA ADDR: 2626 FOREST CIRCLE

ADDR CHG: 03/29/96

JACKSONVILLE, FL 32257 US

ANN REP: (1997) BY 05/08/97 (1998) B 05/06/98 (1999) A 04/07/99

Officers Events Names

----- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT -----
Document Image

the audit

Attachments

649884

1571751