2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2006 8:00 am Secretary of State **DOCUMENT # K99341** 04-19-2006 90093 015 ***150.00 M & K AUTO PARTS & SERVICE, INC. Mailing Address Principal Place of Business **705 NE LIVINGSTON ST** 705 NE LIVINGSTON ST 00040404 MADISON, FL 32340 MADISON, FL 32340 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 03072006 Applied For 4. FEI Number City & State City & State 59-2955574 Not Applicable Country \$8.75 Additional Zip Country Zin 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent . Kelle KELLEY, EMMA L Street Address (P.O. Box Number is Not Adceptable) RT. 1 BOX 2100 MADISON, FL 32340 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of re-\$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE Change Addition TITLE KELLEY, VAN B MARKE NAME RT 1 BOX 2100 STREET ADDRESS STREET ADORESS MADISON, FL CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE TITLE ☐ Delete KELLEY, EMMA L NAME NAME STREET ADDRESS RT. 1 BOX 2100 STREET ADDRESS CITY-ST-ZIP MADISON, FL CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITI F NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP CITY-ST-ZIP ☐ Addition TITI F ☐ Change ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. B. Kelley 4-17-06 SIGNATURE: Va Daytime Phone

FILED

ATTACHMENT

60028462 #K99341

Men address Max auto Parts & Device De. 633 N.E. Colum Kelly Huy. Malison 12l. 32340

Van B Kelley 1072 S.E. Bisbee Loop Madison 12. 323W

> Emma L. Kelley 1072 S.E. Bisbee Loop Madison, Fl. 32340