

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90335 044 ***150.00

DOCUMENT # L95851

1. Entity Name
GENPART, INC.



Principal Place of Business
**6784 NW 17TH AVENUE
FT. LAUDERDALE, FL 33309**

Mailing Address
**363 COWEE TUNNEL RD
SYLVA, NC 28779 US**

50010681



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01142006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0212647

Applied Fe
Not Applic

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, WAYNE M
375 KATHY LANE
MARGATE, FL 33068**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SMITH, WAYNE M.
375 KATHY LANE
MARGATE, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
GARDNER, JENNIFER M.
363 COWEE TUNNEL RD
SYLVA, NC** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
GARDNER, LAWRENCE R.
363 COWEE TUNNEL RD
SYLVA, NC** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
AUAIS, JOSE
8291 NW 167TH TERRACE
HIALEAH, FL 33016** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP
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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Ad
MIAMI LAKES

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

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

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JENNIFER GARDNER
JENNIFER GARDNER

April 7, 2006
April 7, 2006

Date

Daytime Phone #