## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1. Corporation	MENT # <b>L987</b>	<b>7</b> 92 (9)			
	IGN PARTS WAREHOUS	• •			
-		m) If the			
Principal Place	of Business	Mailing Address			
7200 SW 419 MIAMI FL 33 US		7200 SW 41ST ST			
				3. Date Incorporated or Qualified 08/24/1990	3a. Date of Last Report 05/16/1995
2. Principal Pla 21	lace of Business	2a. Mailing Address		4. FEI Number 65-0218564	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.	+:		Not Applicable \$8.75 Additional
Crty & Stale		City & State	City & State		Fee Required
23		[28]	F1		\$5.00 May Be Added to Fees
Zip <b>24</b>	Country 25	Ζφ <b>29</b>	Country 30	8. This corporation has liability for Florida Statutes	
	9. Name and Address of Cu			10. Name and Address of New I	
			81 Name		
KESHEN, NELSON C ESQ 9130 S DADELAND BLVD			82 Street Ac	cidress (P.O. Box Number is Not Acceptal	ole)
SUITE 1511			83		
MIAMI FL 33156			84 City		85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0	on the Several again sugar State			
or registere familiar with	ed agent, or both, in the State of F th, and accept the obligations of, S	Florida. Such change was authoriz	es, the above named corp red by the corporation's br	poration submits this statement for the puloard of directors. Thereby accept the app	rpose of changing its registered office pointment as registered agent. I am
SIGNATURE		- Triban Control of Trollag Clarates	j.		-
12.	Signature, typed or printed name of registored a OFFICE BS	agent and title if applicable (AC AND DIRECTORS	Dit : Registered Agent signature req.		DAT:
THILE	PD	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFF	
NAME	FIGUEROA, RAFAEL	-		RIVERD, OMAR	Change 🔲 Addition
STREET ADDRESS	7200 SW 41ST ST		1.3 STREET ADDRESS	7200 SW ALST	
CITY-ST-ZIP	MIAMI FL		1.4 CITY+ST-ZIP	MIRMI, FL.	
THILE	TD	<b>⊠</b> DELFTE	2 1 THILE	1	Change Addition
NAME	FIGUEROA, RAFAEL		2.2 NAME		<del></del>
STREET ADDRESS	7200 SW 41ST ST		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	KZ DELTE	2.4 CITY - \$1 - ZIP		
NAME	! SD RIVERO, OMAR	<b>₩</b> DELETE		5/D	🔀 Change 🔲 Addition
STREET ADDRESS	3510 NW60TH ST			JOSE A. GARCIA 3510 NW 60T4 5T	
CITY-ST-ZIP	MIAMI FL			Mia MI, FL.	
TITLE	D	DELETE	4. 1 TITLE	THE MI TE.	Change
NAME	RIVERO, CARLOS	_	4.2 NAME		Change Addition
STREET ADDRESS	7200 SW 41ST ST		4.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME			5.2 NAME		<del></del>
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	NEW COLUMN TO THE RESERVE OF THE PARTY OF TH	F" Or ere	5.4 CITY-ST-ZIP		
NAME		[]] DELETE	6. 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME		Í
DITY-ST-ZIP			6.3 STREET ADDRESS		
			6 4 CITY - S1 - ZIP		

oath; that I am an officer or director of this 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SANTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CARLOS RIVERD

4(25/q6

(305) 244 - 2525 Daytinic Phone N