

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99396

FILED  
Mar 07, 2007  
Secretary of State

Entity Name: AUTO REPLACEMENT PARTS INC.

**Current Principal Place of Business:**

14756 S.W. 74 LANE  
MIAMI, FL 33193 US

**New Principal Place of Business:**

**Current Mailing Address:**

14756 SW 74 LN  
MIAMI, FL 33193 US

**New Mailing Address:**

FEI Number: 65-0214032      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HORTENSI, JOSE PD  
14756 SW 74 LN  
MIAMI, FL 33193 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HORTENSI, JOSE PD  
Address: 14756 SW 74 LN  
City-St-Zip: MIAMI, FL 33193 US

Title: TD ( ) Delete  
Name: DABAU, MARIA E TD  
Address: 1120 S.W. 9 CT.  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: SD ( ) Delete  
Name: HORTENSI, MARIA I SD  
Address: 14756 S.W. 74 LANE  
City-St-Zip: MIAMI, FL 33193 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: MEIER, MERCEDES SD  
Address: 14756 S.W. 74 LANE  
City-St-Zip: MIAMI, FL 33193 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE HORTENSI

PD

03/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date