SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

'PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 NOV 25 PM 2:1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M11790 (6) W97-25641

REINSTATEMENT 95-97 90

1. Corporation Name
TINO'S AUTO PARTS, INC.

Principal Place of Business
4000 W. 16TH AVE.
HIALEAH FL 33012

Mailing Address
4000 W. 16TH AVE.
HIALEAH FL 33012

3. Date Incorporated or Qualified: 02/25/1985
3a. Date of Last Report: 05/11/1995
4. FEI Number: 59-2129320 — Applied For / Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 8405 N.W. 53rd Street
Suite, Apt. #, etc.
27 Suite C-103
City & State
28 Miami, Fl
Zip 29 33166 Country 30 U.S.A.

9. Name and Address of Current Registered Agent
DE PIMENTEL, BLANCA V.
5890 S.W. 153RD CT.
MIAMI FL 33186

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Not Acceptable) 1080-- 5
-12/05/97--01105--010
83 ***1080.00 ***1080.00
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Blanca V. de Pimentel
Signature, typed or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when qualifying) DATE 11/25/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D [ ] DELETE	1.1 TITLE	[ ] Change [ ] Addition
NAME	PIMENTEL, ALFREDO	1.2 NAME	
STREET ADDRESS	5890 S.W. 153RD CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	VSD [ ] DELETE	2.1 TITLE	[X] Change [ ] Addition
NAME	DE PIMENTEL, BLANCA V.	2.2 NAME	
STREET ADDRESS	5890 S.W. 153RD CT.	2.3 STREET ADDRESS	6039 COLLINS AVE SUITE 1237
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	AD [ ] DELETE	3.1 TITLE	[ ] Change [ ] Addition
NAME	PIMENTEL, MARTIN A.	3.2 NAME	
STREET ADDRESS	5890 S.W. 153RD CT.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	4.1 TITLE	[ ] Change [ ] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rafael E. Fernandez As Agent for Principals 11/09/97.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (3/96)