

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # M98580**

1. Entity Name  
**ALL DAY USED AUTO PARTS, INC.**



Principal Place of Business  
12710 CAIRO LANE  
OPA LOCKA, FL 33054

Mailing Address  
12710 CAIRO LANE  
OPA LOCKA, FL 33054

**DO NOT WRITE IN THIS SPACE**



02072004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0075177**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

CANTILLO, ELQUIS C  
11201 S.W. 55TH ST., BOX 205  
MIRAMAR, FL 33025

**DO NOT WRITE  
IN THIS SPACE**

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: *Elquis C. Cantillo* 3/17/04  
Signature of registered agent or person authorized to sign on behalf of the registered agent. (NOTE: Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

000000092237  
03/19/04-R0001-001 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	CANTILLO, ELQUIS C
STREET ADDRESS	11201 S.W. 55TH ST., BOX 205
CITY-ST-ZIP	MIRAMAR, FL 33025
TITLE	S
NAME	CANTILLO, ELQUIS C
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CITY-ST-ZIP	MIRAMAR, FL 33025
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: *Elquis C. Cantillo* 3/17/04 305-6884118  
Signature and typed or printed name of signing officer or director Date Daytime Phone #