DOCUN 1. Entity Name EPARTS, I		P00000	)068830			FILED SECRETARY OF ST TALLAHASSEE.FLO		
Principal Place	ef Rusisson		Mailing Address		_	01°SEP -4 PM 3:	33	
1218 DYER BLI KISSIMMEE FL	VD		1218 DYER BLVD KISSIMMEE FL 34741					
		BLVD	3. Mailing Address	ER BLVE	>		×.	
Suite, Apt.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SI	PACE	•
City & State	MEE 2	FLOIZIDA	L City & State KISSIMUEE	- FLORID	A 4. F	El Number 2299584		plied For t Applicable
-Zip -Zu		intry	รี่น่านเ	Country	5. 🤇		8.75 Add	
<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ddress of Current R	egistered Agent		7. N	ame and Address of New Registered A		
DEDESMA.	PEDBO I			Name				
4170 SW 7				Street Addres	ss (P.O. B	lox Number is Not Acceptable)		
Miami FL (	33155							
				City		FL	Zip Code	e
	Signature, typed or printe	d name of registered agent an	id title if applicable. (NOTE	registered office or regi Registered Agent signature reg			\$5.0	
SIGNATURE _ 9. This corpo Tax filing r (See criter	Signature, typed or printe	d name of registered agent an satisfy its Intangible acts to do so.	d title if applicable. (NOTE FILE NOW! After September 12 Make Check Payab	Registered Agent signature reg II FEE IS \$550.00 , 2001 Fee will be \$7 Je to Department of \$	uired when re 50.00 State	Installing) DATE 10. Election Campaign Financing Trust Fund Contribution.	Áddeo	O May Be 1 to Fees
SIGNATURE . 9. This corpo Tax filing r (See criter 11.	Signature, typed or printe pration is eligible to equirement and ele	d name of registered agent an satisfy its Intangible ects to do so.	d title if applicable. (NOTE FILE NOW! After September 12 Make Check Payab	E Registered Agent signature req II FEE IS \$550.00 2, 2001 Fee will be \$7	uired when re 50.00 State	anstaling) DATE 10. Election Campaign Financing	Áddeo	to Fees
SIGNATURE _ 9. This corport Tax filing r (See criter 11. TITLE NAME	Signature, typed or printe pration is eligible to equirement and ele ia on back) , D SOCHOCKI, VIC	d name of registered agent an satisfy its Intangible sorts to do so.	d title if applicable. (NOTE FILE NOW! After September 12 Make Check Payab JIRECTORS	E: Registered Agent signature reg If FEE IS \$550.00 2, 2001 Fee will be \$7 Ste to Department of \$ 12. TITLE NAME	uired when re 50.00 State	Installing) DATE 10. Election Campaign Financing Trust Fund Contribution.	DIRECTOR	to Fees
SIGNATURE . 9. This corport Tax filing r (See criter 11. TITLE NAME STREET ADDRESS	Signature, typed or printe pration is eligible to equirement and ele ia on back)	d name of registered agent an satisfy its Intangible sects to do so.	d title if applicable. (NOTE FILE NOW! After September 12 Make Check Payab JIRECTORS	Pegistered Agent signature reg If FEE IS \$550.00 2, 2001 Fee will be \$7 Se to Department of \$ 12. TITLE	uired when re 50.00 State	Installing) DATE 10. Election Campaign Financing Trust Fund Contribution.	DIRECTOR:	1 to Fees S IN 11
9. This corpc Tax filing r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printe pration is eligible to requirement and ele ia on back) D SOCHOCKI, VIC 1550 NW 108 A MIAMI FL 33172 D GONZALEZ, AR 1218 DYER BLV	A name of registered agent an satisfy its Intangible ects to do so.	d title if applicable. (NOTE FILE NOW! After September 12 Make Check Payab JIRECTORS	E Registered Agent signature reg II FEE IS \$550.00 2, 2001 Fee will be \$7 ble to Department of \$ 12. TITLE NAME STREET ADDRESS	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec	1 to Fees S IN 11 Addition Addition Addition 32
SIGNATURE . 9. This corport Tax filling r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d tite if applicable. (NOTE FILE NOW! After September 12 Make Check Payab DIRECTORS	Pegistered Agent signature rec PEGISTERE IS \$550.00 PEGE WII be \$7 PEGE VII DEPARTMENT of \$  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/01-01	Addec	1 to Fees S IN 11 Addition Addition
SIGNATURE . 9. This corport Tax filing r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d tite if applicable. (NOTE FILE NOW! After September 12 Make Check Payab DIRECTORS Delete Delete Delete	Pegistered Agent signature reg PEGISTERE IS \$550.00 PEGE WII be \$7 PEGE VII DE \$	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec DIRECTOR Change Change Change Change Change Change Change Change Change Change Change	1 to Fees S IN 11 Addition Addition Addition 02 0.00
SIGNATURE . 9. This corport Tax filling r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d title if applicable. (NOTE FILE NOW! After September 12 Make Check Payab DIRECTORS	Pegistered Agent signature reg     FFEE IS \$550.00     , 2001 Fee will be \$7     int to Department of \$         12.         TiTLE         NAME     STREET ADDRESS         CITY-ST-ZIP     TITLE         NAME     STREET ADDRESS         CITY-ST-ZIP     TITLE         NAME     STREET ADDRESS         CITY-ST-ZIP     TITLE         NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     STR	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec DIRECTOR: Change Change Change SD0 ****15 Change	1 to Fees S IN 11 Addition Addition C C C C Addition
SIGNATURE . 9. This corport Tax filling r (See criter 11. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d tite if applicable. (NOTE FILE NOW! After September 12 Make Check Payab DIRECTORS Delete Delete Delete	Pegistered Agent signature req     FEE IS \$550.00     , 2001 Fee will be \$7     le to Department of \$         I2.         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec DIRECTOR: Change Change Change SD0 ****15 Change	1 to Fees S IN 11 Addition Addition C C C C Addition
SIGNATURE . 9. This corport Tax filling r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d tite it applicable. (NOTE FILE NOW! After September 12 Make Check Payab DIRECTORS Delete Delete Delete	Pegistered Agent signature reg     FEE IS \$550.00     , 2001 Fee will be \$7     let to Department of \$         I2.         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec DIRECTOR: Change Change Change Change Change Change	Addition
SIGNATURE - 9. This corpor Tax filling r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d tite it applicable. (NOTE FILE NOW! After September 12 Make Check Payab DIRECTORS Delete Delete Delete	Pegistered Agent signature req     FEE IS \$550.00     , 2001 Fee will be \$7     ite to Department of \$         I2.         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP     TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         STREET ADDRE	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec DIRECTOR: Change Change Change Change Change	Addition
SIGNATURE . 9. This corport Tax filing r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printe pration is eligible to equirement and ele ia on back) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	d name of registered agent an satisfy its Intangible ects to do so.	d tite if applicable. (NOTE FILE NOW! After September 12 Make Check Payab IRECTORS Delete Delete Delete Delete	Pegistered Agent signature reg PEGISTERE IS \$550.00 CONTRACT STATEMENT of STATEMENT OF STATEMENT OF STATEMENT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STR	uired when re 50.00 State	DATE  10. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND  5000045834  -09/11/0101	Addec DIRECTOR: Change Change Change Change Change	Addition

1. Entity Nan EPARTS	ne	# P00000	068830					
-	ce of Business		Mailing Address					
1218 Dyer Bl Kissimmee Fl			1218 DYER BLVD KISSIMMEE FL 34741					
2. Principal F 1214 Suite, Apt.	Place of Busines	BLVD	3. Mailing Address 1214 JyER Suite, Apt. #, etc.	BLVD				
City & Stat	MME	E FLORI	DA Kissimmer	FLORIDA	4. FEI Number 52-2294	1584		pplied For ot Applicable
347	41	Country	3474	Country NS	5. Certificate of Status [	Desired	\$8.75 Ac Fee Requir	iditional ed
	6. Name ar	d Address of Curren	nt Registered Agent	Name	7. Name and Address	of New Registered	d Agent	
4170	esma, pedro ) SW 74 CT MIFL 33155	ΟL			ss (P.O. Box Number is Not Ad	ceptable)	· · · · · · · · · · · · · · · · · · ·	
				City		F	Zip Cod	Je
SIGNATURE .	Signature, typed or p	ubmits this statement in rinted name of registered ager to satisfy its intangibi	- and the same an article and the same article and the same of the	s registered office or regis TE: Registered Agent signature regi 11113FEE: ISJ\$150:00	Jirod when reinstating)	ate of Florida. DATE		
9. This corpo Tax filing r (See criter	Signature, typed or p	rinted name of registered ager to satisfy its intangibil elects to do so.	It and tite if applicable (NC IE FILE NOW After MAX 1/2 Make Check Paya	TE: Registered Agent signature req 1111 FEE: IS \$150:00 001 Fee: will be \$550.0 bble to Department of \$	100 when renetating) 10. Election Cam Trust Fund Co	ate of Florida.	\$5.0	00 May Be d to Fees
9. This corpo Tax filing r (See criter	Signature, typed or p pration is eligible equirement and ia on back)	rinted name of registered ager to satisfy its intangibil elects to do so.	It and tite if applicable (NC IE FILE NOW After MAX 1/2 Make Check Paya	TE: Registered Agent signature req MILEFEE IS:\$150:00 0015 Fee will be \$550.0	100 when rematating) 10. Election Carm Trust Fund Cr	ate of Florida.	\$5.0	d to Fees
SIGNATURE . 9. This corport Tax filing r (See criter 11. TITLE NAME STREET ADDRESS	Signature, typed or p pration is eligible equirement and ria on back)	rinted name of registered ager to satisfy its intangibil elects to do so.	It and tite if applicable (NC Ie FILE NOW After MAX 1/2 Make Check Paya D DIRECTORS	TE: Registered Agent signature req 1111 FEE IS \$150,000 001 Fee will be \$550.0 ble to Department of \$ 12.	100 when renetating) 10. Election Cam Trust Fund Co	ate of Florida.	S5.0     Adde     D DIRECTOF	d to Fees IS IN 11
SIGNATURE . 9. This corport Tax filing r (See criter 11. TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or p rration is eligible equirement and ia on back) D SOCHOCKI, 1550 NW 10 MIAMI FL 33 D GONZALEZ, 1218 DYER	vinted name of registered ager to satisfy its intangibil elects to do so. OFFICERS AND VICTOR J 18 AVE 1172 ARMANDO BLVD	It and tite if applicable (NC Ie FILE NOW After MAX 1/2 Make Check Paya D DIRECTORS	TE: Registered Agent signature req VIII FEE IS; \$150:00° 001° Fee will be \$550 0 ble to Department of \$ 12. TITLE NAME STREET ADDRESS	100 when renetating) 10. Election Cam Trust Fund Co	ate of Florida.	S5.0     Adde     D DIRECTOF	d to Fees IS IN 11
SIGNATURE . 9. This corpc Tax filing r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or p rration is eligible equirement and ia on back) D SOCHOCKI, 1550 NW 10 MIAMI FL 33 D GONZALEZ, 1218 DYER KISSIMMEE D DEDESMA, F 4170 SW 74	ARMANDO BLVD FL 34741 PEDRO L COURT	nt and stie if applicable (NO He FILE NOW After MAY 1,2 Make Check Paya D DIRECTORS Delete	TE: Pegistered Agent signature req 1111 FEE: TS15150:00 001 Fee: will be \$550.0 101 Fee: will be \$550.0 12. 12. 111LE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS	100 when renetating) 10. Election Cam Trust Fund Co	ate of Florida.	D DIRECTOR	d to Fees
SIGNATURE . 9. This corpo Tax filing r	Signature, byped or p rration is eligible equirement and ia on back) D SOCHOCKI, 1550 NW 10 MIAMI FL 33 D GONZALEZ, 1218 DYER KISSIMMEE D DEDESMA, F	ARMANDO BLVD FL 34741 PEDRO L COURT	Int and title if applicable. (NO" Internet Maximum After, Maximum Afte	TE: Registered Agent signature region III. FEE: ISJ:5150-000 001 Fee: will be \$550.0 ble: to Department of 5 12. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	100 when renetating) 10. Election Cam Trust Fund Co	ate of Florida.	D DIRECTOF	d to Fees
SIGNATURE . 9. This corport Tax filing r (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS	Signature, typed or p rration is eligible equirement and ia on back) D SOCHOCKI, 1550 NW 10 MIAMI FL 33 D GONZALEZ, 1218 DYER KISSIMMEE D DEDESMA, F 4170 SW 74	ARMANDO BLVD FL 34741 PEDRO L COURT	nt and tite if applicable (NC Ie FILE NOW After MAX 1/2 Make Check Paya D DIRECTORS Delete Delete Delete	TE: Pegistered Agent signature requirements of the second signature requirement of the second signatur	100 when renetating) 10. Election Cam Trust Fund Co	ate of Florida.	S.C.     Adde     DDIRECTOF     Change     Change     Change	d to Fees

P<sup>i</sup>R.,

: . . . . . . .



1218 Dyer Blvd. Kissimmee, Fl. 34741 Ph: 407-933-0023 Fax: 407-933-0535

## Memo

Date: 8/30/2001

To: Whom it may concern

From: Armando Gonzalez

Re: 2001 Uniform Business Report "UBR"

Earlier during the year I mailed to your office UBR for both Refrigeration Appliance Parts, Inc. and Eparts, Inc. As of today I find that the documents have not been recorded on the sunbiz.org site. I contacted someone in your office and ask if these reports had been received and they have no records of receiving either the reports or the check enclosed for these.

I received a second notice for the Eparts, Inc. Corporation. But nothing for the Refrigeration Appliance Parts, Inc. corporation. This is what made me research the status of these filings.

Your office advised me today to submit the Eparts second notice and a UBR, which I downloaded from your site for the Refrigeration Appliance Parts, Inc. since I didn't get a second notice for that one. I am also including copies of the UBRs mailed previously.

I have confirmed with SunTrust Bank that the check mailed with the original reports has not been cashed.

Gonzalez