

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2003 8:00 am
Secretary of State

04-28-2003 90204 021 ***150.00

DOCUMENT # P02000077403



1. Entity Name
ANMANE AUTO PARTS, INC.

Principal Place of Business
**2050 CORAL WAY STE 303
MIAMI FL 33145**

Mailing Address
**2050 CORAL WAY STE 303
MIAMI FL 33145**

55041712



2. Principal Place of Business
1830 NE 56 Street
Suite, Apt. #, etc.
4

3. Mailing Address
1830 NE 56 Street
Suite, Apt. #, etc.
4

☐ CHECK HERE IF MAKING CHANGES

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

4. FEI Number
55-0791988

Applied For
☐ Not Applicable

Zip
33308

Country
U.S.A.

Zip
33308

Country
U.S.A.

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLANCO, SAMUEL D ESQ.
2050 CORAL WAY STE 303
MIAMI FL 33145**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
DPT ☒ Delete
NAME
NEVOLA, TOMAS
STREET ADDRESS
2050 CORAL WAY STE 303
CITY-ST-ZIP
MIAMI FL 33145

TITLE
DPT ☒ Change ☐ Addition
NAME
NEVOLA, TOMAS
STREET ADDRESS
1830 NE 56 Street #4
CITY-ST-ZIP
Ft. Lauderdale, FL 33308

TITLE
DVS ☒ Delete
NAME
NEVOLA PARENTE, LILIANA C
STREET ADDRESS
2050 CORAL WAY STE 303
CITY-ST-ZIP
MIAMI FL 33145

TITLE
DVS ☒ Change ☐ Addition
NAME
NEVOLA PARENTE, LILIANA C
STREET ADDRESS
1830 NE 56 Street #4
CITY-ST-ZIP
Ft. Lauderdale, FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: **X [Signature]**

4/25/02 **305-774-9600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)