

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2005 8:00 am
Secretary of State

06-24-2005 90002 016 ***150.00

DOCUMENT # P04000121041		
1. Entity Name ONE USED AUTO PARTS, INC.		

Principal Place of Business 4801 S 50TH ST TAMPA, FL 33619-9512	Mailing Address 4801 S 50TH ST TAMPA, FL 33619-9512
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66024855



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

07122005 Chg-P CR2E034 (10/03)

4. FEI Number 20-1569982	Applied For Not Applicable
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	
FLORES, JUAN 4801 S 50TH ST TAMPA, FL 33619-9512		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLORES, JUAN 4801 S 50TH ST TAMPA, FL 336199512 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RAMOS, JOSE 4801 S 50TH ST TAMPA, FL 336199512 ☒ 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 NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: Juan Flores Juan Flores 7/12/05 (813) 388-2107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

66024855

ONE USED AUTO PARTS, INC.
4801 S. 50Th St.
Tampa, Fl. 336019-9512

Certified Letter with Return Receipt

July 11, 2005

Florida Department of State
Division Of Corporation
P.O. Box 6198
Tallahassee, Fl. 32314

Re: 2005 Annual Report
#P04000121041

Gentlemen:

As per telephone conversation today with your staff, enclosed please find our check in the amount of \$150.00 to cover for our subject Annual Reports.

Please be advised that as of the date of this letter we never received your previous renewals reports.

Your prompt processing of our corporation will be greatly appreciated.

Truly yours,

ONE USED AUTO PARTS, INC.

Juan Flores
President

Juan Flores