

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000043205

FILED
May 06, 2008
Secretary of State**Entity Name:** ENTERPRISE TRUCK PARTS, INC.**Current Principal Place of Business:**5565 LEE STREET
UNIT 8
LEHIGH ACRES, FL 33971 US**New Principal Place of Business:****Current Mailing Address:**5565 LEE STREET
UNIT 8
LEHIGH ACRES, FL 33971 US**New Mailing Address:****FEI Number:** 20-4605925**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PAULA, ALEXIS
3711 7TH ST. W.
LEHIGH ACRES, FL 33971 US**Name and Address of New Registered Agent:**PAULA, OSVALDO
3711 7TH ST. W.
LEHIGH ACRES, FL 33971 US

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.

SIGNATURE: OSVALDO PAULA

05/06/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: PAULA, ALEXIS
Address: 3711 7TH ST. W.
City-St-Zip: LEHIGH ACRES, FL 33971 US**Title:** VP () Delete
Name: PAULA, OSVALDO
Address: 3711 7TH ST. W.
City-St-Zip: LEHIGH ACRES, FL 33971 US**Title:** S (X) Delete
Name: PAULA, CARIDAD
Address: 3711 7TH ST. W.
City-St-Zip: LEHIGH ACRES, FL 33971 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: PAULA, OSVALDO
Address: 3711 7TH ST. W.
City-St-Zip: LEHIGH ACRES, FL 33971 US**Title:** S (X) Change () Addition
Name: PAULA, CARIDAD
Address: 3711 7TH ST. W.
City-St-Zip: LEHIGH ACRES, FL 33971 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSVALDO PAULA

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date