

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000071646

Entity Name: ALTERNATIVE AUTOMOTIVE PARTS, INC.

FILED
Jun 15, 2009
Secretary of State

Current Principal Place of Business:

270 S CENTRAL BLVD
SUITE 202
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

270 S CENTRAL BLVD
SUITE 202
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 20-3082104 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COHN, BRIAN S
270 S CENTRAL BLVD
SUITE 202
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COHN, BARRY S
Address: 270 S CENTRAL BLVD SUITE 202
City-St-Zip: JUPITER, FL 33458 US

Title: VP () Delete
Name: COHN, BRIAN S
Address: 270 S CENTRAL BLVD SUITE 202
City-St-Zip: JUPITER, FL 33458 US

Title: S/T (X) Delete
Name: COHN, BRIAN S
Address: 270 S CENTRAL BLVD SUITE 202
City-St-Zip: JUPITER, FL 33458 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP/S (X) Change () Addition
Name: COHN, BARRY S
Address: 270 S CENTRAL BLVD SUITE 202
City-St-Zip: JUPITER, FL 33458 US

Title: P/T (X) Change () Addition
Name: COHN, BRIAN S
Address: 270 S CENTRAL BLVD SUITE 202
City-St-Zip: JUPITER, FL 33458 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: BRIAN S COHN

Electronic Signature of Signing Officer or Director

PRES

06/15/2009

_____ Date