2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P92000011238

1. Entity Name

FATHER & SON AUTO PARTS, INC.



Principal Place of Business

Mailing Address

SIGNATURE (NO TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1723 S.W. 32ND AVENUE MIAMI, FL 33145 1723 S.W. 32ND AVENUE MIAMI, FL 33145

FILED May 02, 2008 8:00 am Secretary of State

05-02-2008 90112 045 ***150.00

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04292008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0375124

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPA

HERNANDEZ, GUILLERMO 3420 SW 117TH COURT MIAMI, FL 33175

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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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 Sonature, typed or pristed name of registered agent and title # applicable. (NOTE: Registered Agent as			signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD HERNANDEZ, GUILLERMO 3420 SW 117TH COURT MIAMI, FL 33175				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<i>;</i>			
TITLE NAME STREET ADDRESS CITY+ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					