

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
 Sandra B. Matham
 Secretary of State
 DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUL -3 AM 8:28

DOCUMENT # P93000025725 (1)

1. Corporation Name

BROTHERS CORES AND AUTO PARTS, INC.

Principal Place of Business

805 NW 31ST AVE
 POMPANO BEACH FL 33069

Mailing Address

POB-654000- 93-4766
 POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0402161

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
 Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21 Suto, Apt #, etc

22 City & State

24

2a. Mailing Address

26 93-4766

27 Suto, Apt #, etc

28 City & State

25

Country

29

Zip

30

Country

30

9. Name and Address of Current Registered Agent

**SILVERSTEIN, LEIGH
 805 NW 31ST AVE
 POMPANO BEACH FL 33069**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the regulations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent's Representative

Signature of Agent or Representative of Corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	SILVERSTEIN, LEIGH
STREET ADDRESS	1012 PINE BRANCH CT
CITY, ST, ZIP	FT LAUDERDALE FL 33328
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO REGISTERED OFFICERS AND DIRECTORS

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my registration 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 12 or Block 13 of this report.

SIGNATURE:

Leigh Silverstein
 LEIGH SILVERSTEIN

6-26-95

305-972-9663

CR2E034 (3/95)