FILED
May 16, 2008 8:00 am
Secretary of State
05-16-2008 90022 007 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000044687

1. Entity Name
RAPID AUTO PARTS, INC.

DO NOT WRITE IN THIS SPACE

40103344

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
6000 GRANADA BLVD		6000 GRANADA BLVD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: CORAL GABLES, FL		City & State: CORAL GABLES, FL	
Zip: 33146	Country: USA	Zip: 33146	Country: USA

4. FEI Number 65-0421281 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: ROGELIO FERNANDEZ
Street Address (P.O. Box Number is Not Acceptable): 6000 GRANADA BLVD
City: CORAL GABLES FL Zip Code 33146

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 ____________________ DATE ________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ — $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROGELIO FERNANDEZ
STREET ADDRESS	6000 GRANADA BLVD
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] — 04/23/08 — 305-905-5329
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Mar 06 2008 2:29 ECFS 305444977 p.1