

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
 04-27-2001 90301 019 ***150.00

DOCUMENT # P93000082988

1. Entity Name
THREE COUNTY AUTO PARTS V, INC.

Principal Place of Business

6680 LANTANA ROAD
 LAKE WORTH FL 33467

Mailing Address

6680 LANTANA ROAD
 LAKE WORTH FL 33467

2. Principal Place of Business

3216 LANTANA RD

Suite, Apt. #, etc.

3. Mailing Address

3216 LANTANA RD

Suite, Apt. #, etc.

City & State

LANTANA, FL

City & State

LANTANA, FL

Zip

33462

Country

US

Zip

33462

Country

US

4. FEI Number **65-0455257**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**FEAMAN, PETER M ESQUIRE
 ARNSTEIN & LEHR
 515 N. FLAGLER DRIVE, 6TH FLOOR
 WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-statuting)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **VSD** ☐ Delete
 NAME **PERALTA, JUAN**
 STREET ADDRESS **16096 NORRIS ROAD**
 CITY-ST-ZIP **LAXAHATCHEE, FL 33470**

TITLE **D** ☐ Delete
 NAME **PERALTA, JUAN C**
 STREET ADDRESS **909 NORTH E ST**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **909 NORTH E. ST.**
 CITY-ST-ZIP **LAKE WORTH, FL 33**

TITLE **V** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **2841 FLORAL RD**
 CITY-ST-ZIP **LANTANA, FL 33462**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)