FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400080389

1. Corporation Name

ADAMS VOLKSWAGEN PARTS INC.

FILED

99 MMR 29 MM 9: 07

SECREMENT OF STATE TALLAHYSSLE, FLORIDA

MANNO	VOLKSWAGEN FARTS INC.	•						
Principal Place	e of Business	Mailing Address					11 ESTER BAISA II	IAMP TANTA TANS TAMP
12565 68TH ST ROYAL PALM E	TN BEACH FL 33412	12565 68TH ST N ROYAL PALM BEACH FL 33412		XX				
						DO NOT WRITE IN THE	5 SPACE	···
						3. Date Incorporated or Qualified 11/02/1994		
2 Principal D	lace of Business	2. Mailing Address	₹a. Mailing Address			4. FEI Number Applied For		
21		26			65-0532407	↓ +	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Additional	
22		27			5. Certifcate of Status Desired		Required	
City & State		City & State			6. Election Campaign Financing	\$5.0	0 May Be	
23		28				Trust Fund Contribution		d to Fees
Zip Country		Zip Country			8. This corporation owes the current year tr	tangible		
4 25		29 30				Personal Property Tax [] Yes [] No		L.}No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent	
COL	LETTI, JOSEPH		}8	1 18	Name			ł
	PINEWOOD AVE		8	32 5	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	ST PALM BEACH FL 33407		Ĺ					
NEC	SI FALM DEACH FE 35407		}8	33				
•			Ē	14 (City		85 Z	p Code
1				ſ	-	F	_	
agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was a tions of, Section 607,0505, Fa	nes, the abc authorized b orida Statute	ove-noy the es.	amed corp e corporatio	oration submits this statement for the purpose on on's board of directors. I hereby accept the appo	ir changing sintment as	registered
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable (NOT	E Registered Ac	gent sig	gnature require	d when revistating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	F			[]] Chang	e [] Addition
NAME	COLLETTI, JOSEPH		1.2 NAM	E				
STREET ADDRESS	12565 68TH ST N		13 STR	EE 1 AD	ORESS			ļ
CITY-ST-ZIP	ROYAL PALM BEACH FL	<u></u>	1.4 City		<u> </u>			
TITLE	STD	_		21 TITLE			Chang	e []] Addition
NAME	COLLETTI, LISA		2 2 NAM	2 2 NAME		6000002831	275	· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	12565 68TH ST N		2 3 STRE	EFT AD	ORESS	600002831 -04/06/99/-	n 1 085 -	-811
CITY-ST-ZIP	ROYAL PALM BEACH FL			2 4 CITY-S1-ZIP		****150.00	***	150.00
TITLE		☐ DELETE	3 1 TITLE		-		[] Chang	e Taddition
NAME			32 NAM	_				
STREET ADDRESS			33STRE					ſ
CITY-ST-ZIP		[] DELETE	34 CITY		riP		[]Chang	e [] Addition
TITLE		F1 nere is					L.3 Chang	e Lawrence
NAME	}		4 2 NAM					ľ
STREET ADDRESS			4 3 STRE		1			ļ
CITY-ST-ZIP		☐ DELETE	44 CITY 51 TITLE				[] Chang	e ∐Add-tion
			5 1 HILE 5 2 NAM				L.J Crisilà	C L3 Mad-90ft
NAME PROFEST ADDRESS			5.3 STRE		ORESS			ļ
STREET ADDRESS			54 CITY		1			İ
CITY-ST-ZIP TITLE	<u></u>	☐ DELETE	61 TITLE		<u></u>		Chang	e Addition
NAME		Octile	62 NAM				C) Suarig	C_1 radiion
STREET ADDRESS			6.3.STR		OORESS			Ì
OTTY. ST. 7IP			64 CITY					į

14. Thereby 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 annual report or suppliemental annual 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 pame appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

The Colletti 1-11-99