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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400086396 (6)

ALTERNATIVE REPLACEMENT PARTS, INC.

FILED Feb 13 1998 8:00am Secretary of State

ACICIII	ATIVE HEI EAGEMENT I AN	10, 1110			
Principal Place	of Business	Mailing Address			INRY KOTAK OTSOK ESINAK DONTO OTET KODY
-620-05TH AVENUE WEST-		P.O. BOX 2178			
-BAADENTON FL 64205		- BRADENTON FL 84200			
				DO NOT WRITE IN	THIS SPACE
				3. Date incorporated or Qualified	
45: 15				11/21/1994	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. W. etc.		Suito Aot # Ata		65-0542420	Not Applicable
22 3405 22M ST. CT. W.		27 3405 22 NE ST. CT. W.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	_ \$5.00 May Be
23 DRAD	ENTON, FL	28 BRADENTON,	FL	Trust Fund Contribution	Added to Fees
Zip Country 25 25 25 25 25 25 25 25 25 25 25 25 25		3 4205 3	Country	8. This corporation owes or has paid the	→ · − ·
24 3 1 20	9. Name and Address of Current		1	Personal Property Tax due June 30. 10. Name and Address of New Regist	
				IV. Hallie Bild Address of Hew Hegist	leteu Ageth
WILCOX, DAVID W					
308 13TH ST. WEST			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
j bre	NDENTON FL 34205		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 obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	SANDLIN, MICHAEL E		1.2 NAME		1 1-1/1
STREET ADDRESS	620 26TH AVENUE WEST		1.3 STREET ADDRESS) 3	3405 22MA STREET CO BLADENTON, FL 3420	OURT WEST
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-ZIP	BRADENTON, FL 34205	5
TITLE	ST	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PILSON, JEFFREY S		2.2 NAME		
STREET ADDRESS	5115 3RD AVE WEST		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34209		2. 4 CITY - ST - ZIP		
TITLE	V	☐ DELETE	3.1 TITLE		Change Addition
NAME	Sandlin, Linda R		3.2 NAME		n 1
STREET ADDRESS	620-26TH AVENUE WES T		3.3 STREET ADDRESS	3405 22 NO STREET BRADENTON, FL. 3420	COURT WEST
CITY-ST-ZIP	BRADENTON FL		3.4. CITY-ST-ZIP	BRADENTON, FL 3420	<i>5</i>
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied with	h this filing does not qualify for		Section 119.07(3)(i), Florida Statutes. I furth	her certify that the information

in 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 suppliencental 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 empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael E. Sandlin MICHAEL E. SANOUN 1-15-98 941-751-925.