

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 # P95000004401

1. Corporation Name

RISA AUTO PARTS, INC.

Principal Place of Business

5390 Palm Ave
Hialeah, FL 33012

Mailing Address

5390 Palm Ave
Hialeah, FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/18/95

4. FEI Number

65-0558823

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

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

MIRELLA DIAZ
5390 Palm Ave
Hialeah, FL 33012

10. Name and Address of New Registered Agent

81 Name

WILLIAM TORRES

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

5390 Palm Ave

83

84 City

Hialeah

FL

85 Zip Code
33012

11. Pursuant to the provisions of Sections 607.0002 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]

WILLIAM TORRES

6/9/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MIRELLA DIAZ
STREET ADDRESS 5390 Palm Ave
CITY-ST-ZIP Hialeah, FL 33012

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME WILLIAM TORRES
1.3 STREET ADDRESS 5390 Palm Ave
1.4 CITY-ST-ZIP Hialeah, FL 33012

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM TORRES

6/9/99

(305) 823 0278

Date

Daytime Phone #

CR2E034 (1/198)

June 9, 1999

Department of State
Division of Corporations
Annual Report Section

To whom it may concern,

I, William Torres, president of RISA AUTO PARTS, INC, document number P95000004401, located at 5390 Palm Ave. Hialeah, FL 33012, am writing this letter to ask you to accept my payment of \$150.00 for the Annual Report fee of the above mentioned Corporation.

I just found out that I was supposed to pay the fee before May 1st but I never received the report and since this is the first time I am a president of a corporation I did not know I had to pay the fee.

Hoping you will accept my payment and my apology.

Sincerely,


William Torres