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

PROFIT CORPORATION ANNUAL REPORT

1999



ELORIDA DEPARTMENT DE STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000013443

BIG AL'S USED PARTS, INC.

Mailing Address Principal Place of Business 7777 NARCOOSSEE ROAD 7777 NARCOOSSEE ROAD ORLANDO FL 32822 ORLANDO FL 32822 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/16/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3306553 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible (TNo Personal Property Tax. 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ALBERT PRICE Street Address (P.O. Box Number is Not Acceptable) 7777 NARCOOSSEE ROAD 7781 NARCOOSSEE RD 83 ORLANDO FL 32822 Zip Code 84 City 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 11 TITLE TITLE JOHNSON, DARRELL SR. 1.2 NAME NAME 7777 NARCOOSSEE ROAD 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32822 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 2.1 TITLE TITLE **PRES** 2.2 NAME NAME ALBERT PRICE STREET ADDRESS 7781 NARCOOSSEE ROAD 2.3 STREET ADDRESS ORALNDO FL 32822 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DELETE ☐ Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change - Addition TITLE 4.1 TITLE 4.2 NAME NAME

I hereby certify that the information supplied with this filling 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

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ DELETE

DELETE

FILED

Jan 21, 1999 8:00am

Secretary of State

01-21-1999 90009 045 ***150.00

☐ Change

Change

☐ Addition

☐ Addition

CR2E034 (11/98)