

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90256 026 ***150.00

DOCUMENT # P95000018400

1. Entity Name
M & D WAREHOUSE AUTO PARTS, INC.



Principal Place of Business
**2510 N.W. 21ST TERRACE
MIAMI, FL 33142**

Mailing Address
**2510 N.W. 21ST TERRACE
MIAMI, FL 33142**

2. Principal Place of Business
3151 NW 32 Ave.

3. Mailing Address
3151 NW 32 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip
33142

Country

Zip
33142

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
65-0589460

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MESA, OSCAR
2510 N.W. 21ST TERRACE
MIAMI, FL 33142**

Name
Mesa, Oscar

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

3151 NW 32 Ave.

City
Miami

FL

Zip Code
33142

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee Will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MESA, OSCAR 3151 N.W. 32 AVE MIAMI, FL 33142	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MESA, OMAR 3151 N.W. 32 AVE MIAMI, FL 33142	☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Oscar Mesa **Oscar Mesa**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/03
DATE

(815) 633-8299
Daytime Phone #

CR2E034 (10/02)