FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000067208 (5)

1. Corporation Name
M.P.L. AUTO PARTS, INC.

Principal Place of Business
1360 SW 29TH AVENUE
FORT LAUDERDALE FL 33342

Mailing Address
1360 SW 29TH AVENUE
FORT LAUDERDALE FL 33342

2. Principal Place of Business
21 4111 SW 47th Ave
Suite, Apt #, etc.
22 Suite 319
City & State
23 Ft. Lauderdale FL
Zip
24 33314
Country
25

2a. Mailing Address
26
Suite, Apt #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified
08/30/1995

3a. Date of Last Report

4. FEI Number
65-0607136
☑ 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 ha[redacted] Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

FERNANDEZ, EDUARDO
520 BRICKELL KEY DRIVE STE 305
MIAMI FL 33131

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 title if applicable
NOTE: Registered Agent signature required when reinstating
DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	MARTI, ALEJANDRO L	
STREET ADDRESS	1360 SW 29TH AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33342	
TITLE	SD	☐ DELETE
NAME	LAZARO, JOSE L	
STREET ADDRESS	1360 SW 29TH AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33342	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	4111 SW 47th Ave, Suite 319	
1.4 CITY-ST-ZIP	Fort Lauderdale FL 33314	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	4111 SW 47th Ave, Suite 319	
2.4 CITY-ST-ZIP	Fort Lauderdale, FL 33314	
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		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

2/2/96 Date
954-587-3975 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alejandro L. Marti, President