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

OCUMENT # P95000095202

FILED Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90086 001 ***158.75

'e impo	PRTS, INC.							
Place	e of Business	Mailing Address				III OBSIL OUILE II		EBUR (ID) LOCA
SOUTH MILITARY TRAIL 551 S MILITARY TRAIL								
BEACH FL 33415 SUITE 6 W. PALM BEACH FL 33415								
					DO NOT WRI	TE IN THIS S	SPACE	
		US			3. Date Incorporated or Qualifed			f
					12/15/1995			
Place of Business 2a, Mailing Address					4. FEI Number		Api	plied For
		26			65-0634169			t Applicable
-wit=, Apt	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	×	\$8.75 A	I
		27			J. Continuate of Ottatas Bostons	<u>~</u> .	Fee Re	quired
Tity & State		City & State			6. Election Campaign Financing	П	\$5.00	May Be
		28			Trust Fund Contribution		Added t	o Fees
∕ ip	Country	Zip	Counti	У	8. This corporation owes the curr			_
	25	29 30)		Personal Property Tax.		Yes	□No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New I	Registered A	gent	
T. 10	MOCON DOMOUND E		8	1 Name				- [
	MPSON, DOUGLAS E		8:	2 Street Add	ress (P.O. Box Number is Not Accept	able)		
	GUN CLUB RD. STE 101					,		
SUIT			8:	3				
W. F	PALM BEACH FL 33415		<u> </u>	4 60			85 Zip (
			8-	4 City		FŁ	85 Zip (,ode
TI IDE	Signature typed or printed name of registered ag	DOU pent and title if applicable. (NOTE: Re	GLAS gistered Ag	E. THOM	ed when reinstating)	03/04 DATE	/99	
1		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change	Addition
	PSD	☐ DELETE	1.1 TITLE				Change	
	STALUPPI, JOHN A JR		1.2 NAME					j
I ADDRLSS			1.3 STREET ADDRESS					
ST-ZIP	W. PALM BEACH FL 33415		1.4 CITY-			•		Addition
	V	☐ DELETE	2.1 TITLE				☐ Change	Addition
	PROVENZO, NICHOLAS C		2.2 NAME		•			
LALMIŘÉŠŠ	551 SOUTH MILITARY TRAIL		2.3 STREET ADDRESS					
ST ZIP	WEST PALM BCH FL 33415		2. 4 CITY	ST-ZIP	p. Per same page andre.			
		☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
	1		3.2 NAME	: [ļ
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ADDE SS			4.3 STRE	ET ADORESS				
ST-ZIP			4.4 CITY-					
JI. Lif		☐ DELETE	5.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
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I ADUBU SS	Ì		5.4 CITY-	1				
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	I		6 2 MARKE	:				I
			6.2 NAME	1				}
I ADDRESS			8	ET ADDRESS				

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 peport 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 furstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attackment with an address, with all other like empowered.

NICHOLAS C. PROVENZO VICE PRESIDENT

03/04/99

(561) 683-7100