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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025912 (2)

AAA APPLIANCE PARTS AND A/C SUPPLIES, INC.

Principal Place of Business Mailing Address

## **FILED** Jan 23 1998 8:00am Secretary of State



4170 S.W. 74 MIAMI FL 33		4170 S.W. 74TH COURT MIAMI FL 33155		DO NOT WRITE IN THIS	S SPACE
1				3. Date Incorporated or Qualified 03/25/1996	
2 Principal P	Izes of Business	2a. Mailing Address		4. FEI Number	10.000.0000.00
2. Principal Place of Business		<del> </del>		,	Applied For
21	# -\-	Suite, Apt. #, etc.		65-0654411	Not Applicable
Suite, Apt #, etc.		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State	•	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	D Yes D No
	9. Name and Address of Curren			10. Name and Address of New Registered	
PEDECIMA PEDDO I					
				EDRO L. DEDE	SMA
C/O WHITE & CASE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	(
200 S. BISCAYNE BOULEVARD, SUITE 4900			83 4/2	20 SW 14 CT	
Mu	AMI FL FL331-31		83		
,			84 City	Aur, FL FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607,250	2 and 607.1508, Florida Statute	es, the above-named cor		
office or r	egistered agent, or both, in the state	of Florida, Such change was a	authorized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the appropriate the purpose accept the purpo	pointment as registered
	Tally all will, and a green in gold g	2019 19 32 32 11 11 10 10 10 10 10 10 10 10 10 10 10	inua Statutes.		,
SIGNATURE	Signature, typed of cripped narrie of registered age	ot and title if applicable (NOTE	E Registered Agent signature regu	Jired when roinstating) DATE	
12,	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	JD DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
NAME	DEDESMA, PEDRO	_	1.2 NAME		
STREET ADDRESS	4170 S.W. 74TH COURT		1.3 STREET ADDRESS		1:
	MIAMI FL				
CITY-ST-ZIP	D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
	•	C pereie			CT cylange CT wadmon
NAME	DEDESMA, MADELAYNE		2.2 NAME		1
STREET ADDRESS	4170 S.W. 74TH COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155		2. 4 CITY - ST - ZIP		
TITLE		DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		}
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY-ST-ZIP		}
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		}
TITLE	·	DELETE	5,1 TITLE	<del></del>	Change Addition
NAME		_	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
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CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
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NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		1
GITV-61-310			G A CITY . ST., 7ID		ì

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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attachment with an address.