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 # P96000067243 (1)

WORLD WIDE AUTO PARTS, INC.

Principal Place of Business

Mailing Address

FILED Apr 14 1998 8:00am Secretary of State



11-7-90

| 5450 PIERCE STREET HOLLYWOOD FL 33021 | | 5450 PIERCE STREET HOLLYWOOD FL 33021 | | | | DO NOT WRITE IN | THIS SPACE | | |
|---|-----------------------------------|--|-----------------------------------|----------|---------------|--|-----------------------------|--------------------------|--|
| | | | | | | 3. Date incorporated or Qualified 08/09/1996 | | | |
| 2. Principal Pi | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | | Applied For | |
| 21 | D -4- | 26 | | | | 65-0687591 | 00.7 | Not Applicable | |
| Suite, Apt. | | Suite, Apt. #, etc. | 27 | | | | Fee | 5 Additional Required | |
| City & State | | City & State | 28 | | | 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 | | . — | |
| 24 | 25 9. Name and Address of Curr | 29 ant Pagislared Agent | 30 | | 1 | Personal Property Tax due June 30 10. Name and Address of New Regis | | | |
| | JLLIN, JAMES G | elli nagiatorau Again | 81 | I Na | ame | IV. Harrie and Address of New Hegis | nord Agent | | |
| | 63 NW BOCA RATON BLVD. | | | | | | | | |
| | 205 | | 82 Street Ad | | reet Address. | s (P.O. Box Number is Not Acceptable) | | | |
| | CA RATON FL 33431 | | 83 | 3 | | | | | |
| | | | ļ | | | | | 0.1 | |
| | | | 84 | Cit | ity | | FL 85 Z | ip 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 agont, 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 regressed agent and title diapplicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | | | |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICER | S AND DIRECT | ORS IN 12 | |
| TITLE | P | ☐ DELETE | 1.1 TITLE | | | | ☐ Chang | e 🔲 Addition | |
| NAME | Morles, Rafael | | 1.2 NAME | | | | | | |
| STREET ADDRESS | | | 1.3 STREE | T ADDR | RESS | | | | |
| CITY-ST-ZIP | HOLLYWOOD FL | | 1.4 CITY- | ST-ZIP | · | ···· | | | |
| TITLE | | DELETE | 2.1 TITLE | | | | ∐ Chang | e Addition | |
| NAME | | | 2.2 NAME | | | | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 2. 4 CITY - ST - ZIP 3.1 TITLE | | <u></u> | | Chang | e Addition | |
| NAME | | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | 3.3 STREE | | RESS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY- | | | | | | |
| TITLE | | ☐ DELLETE | 4.1 TIBLE | | | | ☐ Chang | e Addition | |
| NAME | | | 4. 2 NAME | | | · | | | |
| STREET ADDRESS | | | 4.3 STREE | T ADDR | RESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY- | ST-ZIP |) | | | | |
| TITLE | DELETE | | 5.1 TITLE | | | | L_] Chang | e L. Addition | |
| NAME | i | | 5.2 NAME | | DE00 | | | | |
| STREET ADDRESS | | | 5.3 STREE | | | | | | |
| CITY-ST-ZIP TITLE | | | 5.4 CITY - 6.1 TITLE | 51-71P | · | <u></u> | ☐ Chang | e Addition | |
| NAME | | La becelt | 6.2 NAME | | | | 0.40% | | |
| STREET ADDRESS | | | 6.3 STREE | | RESS | | | | |
| CITY-ST-ZIP | | | 6.4 CITY - | | | | | | |
| 14. I hereby o | | | or the exemp | ption | stated in Se | ction 119.07(3)(i), Florida Statules. I fur shall have the same legal effect as if m ad by Chapter 607, Florida Statutes; an | | | |