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

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

PROFIT FLORIDA DEPARTMENT OF STATE · LECK ORATION Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** DOCUMENT # P96000068024 (4) 99 JUN 15 PH 2: 02 1. Corporation Name SLORE W. D. STATE BREX PARTS CORP. TALLAHASSEE, FLORIDA Principal Place of Business Malling Address 10853 N.W. 29 ST 10853 N.W. 29th STREET MIAMI, FL. 33172 MIAMI, FL. 33172 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/15/1996 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0688578 26 Not Applicable \$8.75 Additional Suite, Apt #, etc. Sulte, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Žio Country Zip 8. This corporation owes the current year Intangible ☐ Yes □No Personal Property Tax. 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 VALDES_BRITO, JULIO 4030 S.W. 147th AVE. 82 Street Address (P.O. Box Number Is Not Acceptable) MIRAMAR, FL. 33027 83 84 Zip Code City 85 FL 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 bits if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE ☐ Change Addition VALDES-BRITO, Julio 1.1 TITLE TITLE 4050 S.W. 147th AUR 1.2 NAME NAME 1.3 STREET ADDRESS STREET ALBRESS LIBALIAR A. 33027 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE 22 NAME NAME ****150.00 ****150.00 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 61 TITLE Change Addition DELETE TITLE 6.2 NAME NAME

14. 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 suppliemental 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, with all other like empowered. (305)593-0486 Devilme Phone #

Date

6.3 STREET ADDRESS

84 CITY-ST-ZIP

TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR



BREX PARTS CORP.



10853 N.W. 29th STREET MIAMI, FL 33172

June 11, 1999

To: Florida Department of State Division of Corporations

From: Brex Parts Corp. Document No. P96000068024 EIN No. 65-0688578

To Whom It May Concern:

This letter is to inform you that out company BREX PARTS CORP, moved as you can see in this form, and that's the reason why we haven't received the new Filing Form for 1999 Corporation Annual Report.

We apologize for any inconvenience.

If you have any questions, Please do not hesitate to call us at (305)593-0486.

Thanking you,

Respectfully yours,

Julio Maldes-Brito

(President)