## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 14, 2001 8:00 am Secretary of State DOCUMENT # P96000102619 R & C AUTO PARTS CORP. 04-14-2001 90028 050 \*\*\*150.00 Principal Place of Business Mailing Address 400 E. 41 ST. 400 E. 41 ST. HIALEAH FL 33013 HIALEAH FL 33013 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0714342 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FERNANDEZ, RAUL Street Address (P.O. Box Number is Not Acceptable) 2916 W. 68TH PL. HIALEAH FL 33018 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition CR2E034 (10/00) ☐ Change TITLE ☐ Delete NAME NAME FERNANDEZ, RAUL STREET ADDRESS STREET ADDRESS 2916 W. 68TH PL. CITY-ST-ZIP CITY-ST-7IP HIALEAH FL 33018 ☐ Change ☐ Addition TITLE Delete TITLE HERNANDEZ, GUADALUPE NAME NAME STREET ADDRESS STREET ADDRESS 2916 W. 68TH PL. CITY-ST-7IP CITY-ST-ZIP HIALEAH FL 33018 -- E] Delete \_ Change ☐ Addition TITLE TITLE -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental report is the 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 fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

VICE PRESIDENT

SIGNATURE: