

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 10, 2005 8:00 am
Secretary of State

06-10-2005 90047 035 ***158.75

DOCUMENT # P98000002705

1. Entity Name
SOUTH POWER AUTO ELECTRIC SUPPLY, CORP.



Principal Place of Business
**1380 NW 23 STREET
MIAMI, FL 33142**

Mailing Address
**1380 NW 23 STREET
MIAMI, FL 33142**

2. Principal Place of Business

3. Mailing Address

7107, SW, 21 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06072005

Chg-P

CR2E034 (10/03)

City & State

City & State

MIAMI, FL

4. FEI Number

65-0803902

Applied For

Not Applicable

Zip

Country

Zip

Country

33155

USA

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GOMEZ, FELIX A
1380 NW 23 STREET
MIAMI, FL 33142**

Name

Gomez Felix A.

Street Address (P.O. Box Number is Not Acceptable)

15969, SW, 149 Terra

City

MIAMI

FL

Zip Code

33196

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. I am familiar with, and accept the obligations of registered agent.

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
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GOMEZ, FELIX A
1380 NW 23 STREET
MIAMI, FL 33142** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
GOMEZ, LUIS E
1380 NW 23 STREET
MIAMI, FL 33142** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SECRETARY
GOMEZ, Felix A
7107, SW, 21 ST
MIAMI, FL 33155** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Felix Gomez

6/7/05