

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000042241

Entity Name: JAF AUTO PARTS, INC.

FILED  
Mar 25, 2009  
Secretary of State

## Current Principal Place of Business:

6601 NORTHWEST 14 STREET  
#3  
PLANTATION, FL 33313

## New Principal Place of Business:

4546 NORTH HISTUS ROAD  
SUNRISE, FL 33351

## Current Mailing Address:

6601 NORTHWEST 14 STREET  
#3  
PLANTATION, FL 33313

## New Mailing Address:

4546 NORTH HISTUS ROAD  
SUNRISE, FL 33351

FEI Number: 65-0835649

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLSKY, BRIAN M  
782 SW 119TH WAY  
DAVIE, FL 33325 US

## Name and Address of New Registered Agent:

POLSKY, BRIAN M  
11872 SW 9TH MANOR  
DAVIE, FL 33325 US

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:

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: POLSKY, BRIAN  
Address: 782 SW 119TH WAY  
City-St-Zip: DAVIE, FL 33325

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: POLSKY, BRIAN  
Address: 11872 SW 9TH MANOR  
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN M. POLSKY

PSD

03/25/2009

Electronic Signature of Signing Officer or Director

Date