PROFIT CORPORATION ANNUAL REPORT

AH-SO AUTO PARTS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # P98000074438 1. Corporation Name

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90139 002 ***150.00

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	4 D. J. D. J	Moiling Address							
Principal Place of Business Mailing Address									
10381 NW 62ND DRIVE 10381 NW 62ND DRIVE			•				•		
PARKLAND FL 33076 PARKLAND FL 33076						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						08/24/1998			
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21 1711 C BLOOM T RE 26 VILLE BLOW				- 82.	እ	65-0860791		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			J O V .					\$8.75	Additional
		27 Pompano	BY.W	E1	_	5. Certifcate of Status Desired		Fee Re	quired
22 You Qano Bun Fu 27 You Yano City & State City & State						6. Election Campaign Financing		\$5.00	May Be
23 3 3069 28 33069						Trust Fund Contribution		Added t	o Fees
Zip	Zip Country Zip					8. This corporation owes the curr	ent year Ima		_
24	25	29 30				Personal Property Tax.		Yes	□ No
	9. Name and Address of Curren	t Registered Agent		,		10. Name and Address of New F	Registered A	(geht	
			81	Name					
	owin, Kenneth C		82	Street	Addre	ss (P.O. Box Number is Not Accept	able)	·	
10381 NW 62ND DRIVE					١				
PAŘÍ	KLAND FL 33076		83		,]
			84	City		·		85 Zip (Code
							F <u>L</u>		
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autr tions of, Section 607.0505, Florida	onzed by a Statutes	tne corpe	oranon	s board of directors. Thereby accept	or the appoint	tment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered eger		gistered Ager	nt signature r	equired v	when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS ANI	DIRECTO Change	Addition
TITLE	D	☐ DELETE	1.1 TITLE					Change	
NAME	BALDWIN, KENNETH C		1.2 NAME			IIC BLOOKE R	. . .		
STREET ADDRESS	10381 NW 62ND DRIVE		1.3 STREE	FADDRESS					
CITY-ST-ZIP	PARKLAND FL 33076		1.4 CITY-S	T-ZIP		ompano Bens	<u> </u>	Change	Addition
TITLE		☐ DELETÉ	2.1 TITLE		Ø.	_		Change	DE-Addition
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STREET ADDRESS			2.3 STREE	T ADDRESS		IC BLOOME BY	. ~	2 ~ 1 ~]
CITY-ST-ZIP			2. 4 CITY-5	ST-ZIP	52	mpano ben	<u> 子し さ</u>	<u> PV 02</u>	- Addition
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NAME			3.2 NAME						}
STREET ADDRESS			3.3 STREE	TADDRESS				•	}
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP				Charac	- Addition
TITLE		☐ DELETE	4.1 TITLE		\			☐ Change	☐ Addition }
NAME	~ ′		4. 2 NAME	. ~					
STREET ADDRESS			4.3 STREE	TADORESS		-			İ
CITY-ST-ZIP			4.4 CITY-S	T- ZIP					
TITLE		☐ ĐELETE	5.1 TITLE					☐ Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS				TADDRESS					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	<u> </u>				
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition
NAME		e de la companya del companya de la companya del companya de la co	6.2 NAME						
STREET ADDRESS			6.3 STREE	TADDRESS	J				ļ
	İ		64 CITY-S		ł				1

14. 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 annual report or supplemental 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.

SIGNATURE:

IATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/99