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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000090982

Corporation Name

AUTOMOTIVE PARTS COMPANY

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90242 014 ***150.00



Principal Place of Business		Mailing Address	Mailing Address			i samtimat ein annt matte mett matte mett matte mette mette mette matte mette matte mette mette matte mette matte mette mette mette matte mette			
12062 SW 117		12062 SW 117 COURT #138							
MIAMI FL 33186		MIAMI FL 33186	MIAMI FL 33186			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed				
					10/26/1998				
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number		A	pplied For	
21		26		65-0875614		N	lot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional	
22		27		5. Certificate of Status Desired		Fee F	Required		
City & Stat	e	City & State		6. Election Campaign Financing			May Be		
23		28		Trust Fund Contribution		Added	to Fees		
Zip	Country	Zip	_ Count	ry	8. This corporation owes the curre	nt year Inta		<u>,</u>	
24	25	29 3	0		Personal Property Tax.		Yes	Mo	
	9. Name and Address of Currer	nt Registered Agent	-	1 Name	10. Name and Address of New R	egister <u>e</u> a <i>F</i>	rgent		
BCI I	., Terry								
	32 SW 117 COURT #138	82 Street Ad		dress (P.O. Box Number is Not Acceptal	ple)				
	MI FL 33186			3					
i ittivali	WI I E 30 100		l°	3					
			8	4 City		FL	85 Zip	Code	
				<u> </u>	poration submits this statement for the p			to registered	
agent. i a SIGNATURE	m familiar with, and accept the obliga	ations of, Section 607.0505, Front	a Statute	es.	ion's board of directors. I hereby accept	DATE			
	Signature, typed or printed name of registered age			gent signature requir	red when reinstating) ADDITIONS/CHANGES TO OFF		D DIRECT	ORS IN 12	
12.	D OFFICERS AF	ND DIRECTORS	13.	 _	ADDITIONS/CHANGES TO OFF	ICENS AN	Change		
	BELL, TERRY		1.2 NAMI				_ '		
NAME	12062 SW 117 COURT #138			ET ADDRESS					
STREET ADDRESS	MIAMI FL 33186		1.4 CITY-						
CITY-ST-ZIP	D ·	☐ DELETE	2.1 TITLE				☐ Change	Addition	
NAME	BELL, JEANNE		2.2 NAM			-			
STREET ADDRESS	9945 SW 223 TERRACE			ET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33190		2. 4 CfTY						
TITLE	With day 11 2 00 100	☐ DELETE	3.1 TITLE				☐ Change	e 🔲 Addition	
NAME			3.2 NAMI	E		•			
STREET ADDRESS			3.3 STRE	ET ADDRESS					
CITY-ST-ZIP			3.4. CITY					<u>. </u>	
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAV	iE					
STREET ADDRESS			4.3 STRE	EET ADDRESS					
CITY-ST-ZIP	· 		4.4 CITY	-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Change	e	
NAME			5.2 NAM	E					
STREET ADDRESS			5.3 STRE	EET ADDRESS					
CITY-ST-ZIP			5.4 CITY						
TITLE		☐ DELETE	6.1 TITLE		-		☐ Change	Addition	
NAME			6.2 NAM	E					
STREET ADDRESS			6.3 STRE	EET ADDRESS					
CITY OF TID			6.4 CITY	-ST-ZIP					

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: