

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 21, 2003 8:00 am**  
**Secretary of State**

07-21-2003 90137 037 \*\*\*150.00

0030578 AV

DOCUMENT # **P99000073508**

1. Entity Name  
**RECYCLEDPCPARTS.COM, INC.**



Principal Place of Business  
**4159 NW 135TH ST.  
OPA LOCKA FL 33054**

Mailing Address  
**4159 NW 135TH ST.  
OPA LOCKA FL 33054**

2. Principal Place of Business

**4390 NW 135 ST**

3. Mailing Address

**4390 NW 135 ST**

Suite, Apt. #, etc.

Suite, Apt. #, etc.



CHECK HERE IF MAKING CHANGES

City & State

**OPA LOCKA, FL**

City & State

**OPA LOCKA, FL**

4. FEI Number

**65-0942072**

Applied For

Not Applicable

Zip

**33054**

Country

**USA**

Zip

**33054**

Country

**USA**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**WOOD, JAMES  
4159 NW 135TH ST.  
OPA LOCKA FL 33054**

7. Name and Address of New Registered Agent

Name **WOOD, JAMES**  
Street Address (P.O. Box Number is Not Acceptable)  
**4390 NW 135 ST**  
City **OPA LOCKA** FL Zip Code **33054**

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 \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>WOOD, JAMES</b>	
STREET ADDRESS	<b>4159 NW 135TH ST.</b>	
CITY-ST-ZIP	<b>OPA LOCKA FL 33054</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> Delete
NAME	<b>GARLOCK, VICTOR</b>	
STREET ADDRESS	<b>4159 NW 135TH ST.</b>	
CITY-ST-ZIP	<b>OPA LOCKA FL 33054</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WOOD, JAMES</b>	
STREET ADDRESS	<b>4390 NW 135 ST</b>	
CITY-ST-ZIP	<b>OPA LOCKA FL 33054</b>	
TITLE	<b>VP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GARLOCK, VICTOR</b>	
STREET ADDRESS	<b>4390 NW 135 ST</b>	
CITY-ST-ZIP	<b>OPA LOCKA FL 33054</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2034 (4/03)

Attachment

RecycledPCparts.com, Inc  
4390 NW 135th St  
Opa Locka, FL 33054

10110264  
#P99000073508

Division of Corporations  
Uniform Business Report  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

7/3/03

re: Corporate Renewal Form - UBR

Dear Division of Corporations:

We have only just now gotten your filing application for 2003. In February we moved to a new address and changed our address with the post office. However, due to unforeseen delays our office could not move immediately and so we cancelled the change of address a month later. Still, our mail to our 4159 NW 135 St was mistakenly getting returned to senders or rerouted to the warehouse. When we corrected the post office about it, mail addressed to our new address for our warehouse started getting returned to senders. Our office address is now at the new warehouse address at 4390 NW 135 St.

Our old address was:

RecycledPCparts.com, Inc.  
4159 NW 135 ST  
Miami, FL 33160-2414

Our current address is:

RecycledPCparts.com, Inc.  
4390 NW 135<sup>th</sup> St.  
Opa-Locka, FL 33054

Enclosed is the \$150.00 filing fee.

Thank you,



Nitza Freeman  
Bookkeeper  
305-688-7727