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 # S02085

RADIATOR WAREHOUSE, INC.										
					****					615) 6 15) 100)
Principal Place of Business Mailing Address										
4700 NE 11TH AVENUE 4700 NE 11TH AVENUE										
FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporate		11 11 11 11	OI AOL	
						09/21/1990	, , , ,			,
6 Dringing C	less of Business	2a, Mailing Address				4: FEI Number		·	I A	oplied For.
						65-0226665				ot Applicable
Suite, Apt.		Suite, Apt. #, etc.							Additional	
	w, 610.	1	27			5. Certificate of Stat	us Desired	□.		equired
City & State	Θ	City & State			6. Election Campaig	n Financino	_	\$5.00	May Be	
23	•	28				Trust Fund Contr	_		Added	
Zip	Country Zip			ntry		8. This corporation	•	ent vear Int	tangible	
24	25 29 30					Personal Propert			(Akyes	□No
	9. Name and Address of Curr		1991			10. Name and Addr	ess of New F	Registered	Agent	
	3. Hallo dile Hadisəs of Sali			81	Name				- •	
WILSON, KEITH				20	04	(D.O. Day Number)	a Net Asset	shio)		
4700 NE 11TH AVE.				82	Street Addre	ess (P.O. Box Number i	s Not Accepta	ine)		5,24, 9,941, 5,57
FT. LAUDERDALE FL 33334				83		1 - 1404 (egl)		15, 23, 5 %.	(1) 7(2)(1: 3)(5161 8181 (83)
							1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			<u> </u>
				84	City			FI	85 Zip	Code
44 Discussed	to the provisions of Sections 607.0	502 and 607 1508 Florida Statut	es the at	DOVE	-named corpo	ration submits this stat	ement for the	purpose of	changing its	registered
' office or r	edistered agent of both in the Stat	re or Fiorida. Such change was a	uu 1011266	י עט	uie corporation	n's board of directors. I	hereby accep	ot the appo	intment as re	egistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Flo	nga Stati	ites.	•			•		}
SIGNATURE	Signature, typed or printed name of registered a	and and title if applicable (NOTE	Registered	Agent	t signature required	when reinstating)		DATE		
12.	•	AND DIRECTORS	13.			ADDITIONS/CHAI	IGES TO OF	FICERS A	ND DIRECT	ORS IN 12
TITLE	PD	☐ DELETE	1.1 18	LE		15.11.125		· ·	Change	☐ Addition
NAME	WILSON, KEITH		1.2 NA	ME				•	,	
STREET ADDRESS	4700 NE 11TH AVE		1.3 ST	REET	ADDRESS					•
	FT. LAUDERDALE FL	•	1.4 CF			,				
CITY-ST-ZIP TITLE	VD VD	☐ DELETE	2.1 TIT						☐ Change	☐ Addition
NAME	WILSON, TERRY	_	2.2 NA							
	14 N.W. 6TH ST.				ADDRESS					
STREET ADDRESS	FT. LAUDERDALE FL		2.4 CI							
CITY-ST-ZIP	FT. DAUDERDALL TE	☐ DELETE	3.1 TII		1-211		· .	<u> </u>	Change	☐ Addition
TITLE			3.2 NA					•		
NAME	\$ * * · · · · · · · · · · · · · · · · ·				ADDRESS				. carena como	
STREET ADDRESS	3 -									驅蟲聯
CITY-ST-ZIP		□ DELETE	3.4. CI 4.1 TII		1-217		113 - 34 Ph/Si k	£ 2. 25%	:: Change	Addition
TITLE			4.7 III							
NAME	,			-		•				
STREET ADDRESS	l ·		- 1		ADDRESS					
CITY-ST-ZIP		□ DELETE	4.4 CF	_	r- ZIP			-	☐ Change	Addition
TITLE		☐ DELETE	5.1 TIT 5.2 NA			10				
NAME						at the term				
STREET ADDRESS			5.3 ST	KEET	ADDRESS	•	•			

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.

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

FILED

Feb 09, 1999 8:00am

Secretary of State

02-09-1999 90022 047 ***150.00

Change

☐ Addition