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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # S

TITLE

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

S11381

(8)

DON BIALEK AUTO PARTS, INC.

FILED
May 04 1998 8:00am
Secretary of State

	THE TAIN OF THE TA				
Principal Plac	e of Business	Mailing Address			211
2101 STARKEY RD LARGO FL HIGHT 33 7) /	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				11/05/1990	
2. Principat Place of Business 2a. Mailing Address		2a, Mailing Address		4. FEI Number	Applied For
21		26		59-3036836	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		S. Commodic of clares posited	Fee Required
City & State	o <u> </u>	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25		10	Personal Property Tax due June 30.	Yes No
	 Name and Address of Current LEK, DONALD	ent Registered Agent	81 Name	10. Name and Address of New Registere	d 'Agent
	RGO FL 94841		83 84 City	ress (P.O. Box Number is Not Acceptable)	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Soctions 607.05 egistered agent, or both, in the Stal m familiar with, and accept the obli	502 and 607.1508, Florida Statutes te of Florida. Such change was au gations of, Section 607.0505, Flori	, the above-named corp horized by the corpora da Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	geni and ble if applicable (NOTE: I	Registered Agent signature requi	red when reinstating) DA1E	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	☐ DELE T E	1.1 TALE		Change Addition
NAME	BIALEK, DONALD		12 NAME		
STREET ADDRESS	2101 STARKEY RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL 33771		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
=		ר"ו הנינונ			LI CHANGE LI AGUNTON
NAME Street address			3.2 NAME 3.3 STREET ADDRESS		į
				•	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		tal proces	4. 2 NAME		FI (Applifold)
STREET ADDRESS			4.3 STREET ADDRESS		}
AND AT TO			4.5 SINCLI ADDRESS		

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 onen attachment with an address.

5.2 NAME

6.1 TITLE 6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

DELETE

DELETE

SIGNATURE: Land Brake DOWALD BIA

42408 /813-536-5578

Change

Change

Addition

Addition