FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

$200

APPROVED AND FILED

95 APR 27 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S 77450

1. Corporation Name
FLORIDA CONSTRUCTION PARTS, INC

Principal Place of Business	Mailing Address
TAMPA, FL 3361	P.O. Box 13785 TAMPA, FL 33681-3785

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 9/3/91
3a. Date of Last Report: 3/22/94

2. Principal Place of Business	2a. Mailing Address
21 4813 Tyson Street	26 P.O. Box 13785
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 TAMPA, FL	City & State 28 TAMPA, FL
Zip 24 33611 Country 25 USA	Zip 29 33681 Country 30 USA

4. FEI Number: 59-3083758 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Buck, Glen A 5621 E Adamo Dr Bldg 2, Apt C Tampa, Fl 33619	81 Name: JEFF ANDERSON 82 Street Address (P.O. Box Number is Not Acceptable): 1218 ROXMERE RD. 83 84 City: TAMPA FL 85 Zip Code: 33629

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Jeffrey P. Anderson Pres. DATE: 2/9/95
Signature of new registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT / Secretary	11 TITLE	PRESIDENT / Secretary ☒ Change ☐ Addition
NAME	JEFF ANDERSON	12 NAME	JEFFREY P. ANDERSON
STREET ADDRESS	1218 ROXMERE RD.	13 STREET ADDRESS	1218 ROXMERE RD.
CITY-ST-ZIP	TAMPA FL 33629	14 CITY-ST-ZIP	TAMPA, FL 33629
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	100001459711
STREET ADDRESS		23 STREET ADDRESS	-05/01/95--01073--013
CITY-ST-ZIP		24 CITY-ST-ZIP	****200.00 ****200.00
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	4/27/95 UST
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Jeffrey P. Anderson JEFFREY P. ANDERSON-Pres 4/19/95 (813) 281-9063
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #