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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # V59529

(0)

FILED Apr 10 1997 8:00am Secretary of State

2. First, qual Placer of Quarteries 2a. Maling Address 3. Date Incorporated or Qualified 3b. Date of Last Report 38/4/1992 3c. Date	UNIVERSAL TRUCK PARTS & SALES INC. Principal Place of Business Mailing Address 4171 L. B. MCLEOD RD. ORLANDO FL 32811 ORLANDO FL 32811-5614									
22						,			eport	
Selection Companies	2. Principal P	lace of Business	2a. Mailing Address						plied For	
City & State Ci	21					59-3139526		····	··	
27		#, etc.	<u></u> ⊢¬			5. Certificate of Status Desi	red 🗀	4 - · · ·		
28										
Part Country Zep Country Set This corporation has hability for intengable tox under 8. 199 032, plotted Statutes fees No Name and Address of Current Registered Agent Name Statutes Feet Name Street Address (P.O. Box Number is Not Acceptable)		e	<u>├</u> ─┐ ′							
9. Name and Address of Current Registered Agent WILLIS, LEON F., JR. 8134 OAKLAND PLACE ORLANDO FL 32819 82 Sitreot Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 80 Zip Code 80 Zip Code 80 Zip Code 81 Zip Code 81 Zip Code 82 Zistreot Address (P.O. Box Number is Not Acceptable) 83 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 89 Zip Code 80 Zip Code 8		Country		Co	untry					
9. Name and Address of Current Rigistared Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name and Address of New Registered Agent 13. Name and Address (P.O. Box Number is Not Acceptable) 13. Name and Address (P.O. Box Number is Not Acceptable) 13. Name and Address (P.O. Box Number is Not Acceptable) 13. Name and Address of New Registered Agent 13. Name and Address (P.O. Box Number is Not Acceptable) 13. Name and Address of New Registered Agent 13. Name and Address of Not Acceptable) 13. Name and Name and Address of Not Acceptable 13. Name and Name and Address of Not Acceptable 13. Name and Nam	—	├	}-~η		,	•			. 190.002,	
82 Sireet Address (P.O. Box Number is Not Acceptable) 83 OAKLAND PLACE ORLANDO FL 32819 84 City FL 85 Zip Codo 11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent of minimate with, and accept the obligations of, Section 607 0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent of minimate with, and accept the obligations of, Section 607 0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and infer accept the obligations of, Section 607 0505. Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent and infer accept the obligations of, Section 607 0505. Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered gent and infer accept the obligations of, Section 607 0505. Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered gent and infer accept the obligations of, Section 607 0505. Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered gent and infer accept the obligations of, Section 607 0505. Florida Statutes, and the corporation's board of directors. I hereby accept the appointment as registered gent and infer accept the obligations of, Section 607 057 057 057 057 057 057 057 057 057 0					I		New Registered	Agent		
ORLANDO FL 32819 24 City FL 85 Zip Code					81 Nan	ne				
ORLANDO FL 32819 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 607,0502 and 607,1508. Florida Statufes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statufes, the above named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statufes, agent 1 am femiliar with, and accept the displayment of septical Statufes. SIGNATURE SIGNATURE 12. OF FICE RIS AND DIRE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE COP WILLIS, LEON F., JR. 8134 OAKLAND PLACE ORLANDO FL 13 SIREFI ADDRESS CITY ST. 2P THE DS ADAKLAND PLACE ORLANDO FL 14 CITY ST. 2P THE DS ADAKLAND PLACE ORLANDO FL 15 TITLE 16 Change Addition Addition Addition Addition Addition Addition Addition Addition ANA SIREFI ADDRESS CITY ST. 2P THE DELETE ST. THE CHANGES SIREFI ADDRESS CITY ST. 2P THE CHANGESS CIT					82 Stre	et Address (P.O. Box Number is Not A	cceptable)			
Section Sect	ORL	ANDO FL 32819								
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 agont, or oath, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, or oath, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, or oath, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, or oath, in the State of Florida Statutes, agont a family and accept the objections. In the state of Florida Statutes and the state of Florida Statutes and the state of Florida Statutes. In the state of Florida Statutes are stated as a state of Florida Statutes. In the state of Florida Statutes. In the state of Florida Statutes. In the state of Florida Statutes and the state of Florida Statutes. In the state of Florida Statutes. In the state of Florida Statutes and the state of Florida Statutes. In the state of Florida Statutes. In the state of Florida Statutes and the state of Florida Statutes. In the state of Florida Statutes and the state of Florida State					83	•				
11. Presunt 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 agent. I am familiar with, and accept the obligations of, Section 607-0505, Florida Statutes, or expected agent. I am familiar with, and accept the obligations of, Section 607-0505, Florida Statutes. SIGNATURA 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INTE NULLIS, LEON F., JR. 8134 OAKLAND PLACE ORLANDO FL DELETE 14 (01Y-51-2P THE DS ADAMS, KAREN M. 8134 OAKLAND PLACE ORLANDO FL ORLETE 15 ITHE DS ADAMS, KAREN M. 8134 OAKLAND PLACE ORLANDO FL ORLETE 15 ITHE DS ADAMS, KAREN M. 8134 OAKLAND PLACE ORLANDO FL ORLANDO FL ORLANDO FL ORLETE 15 ITHE DELETE 15 ITHE DELETE 15 ITHE DELETE 15 ITHE Change Addition Addition ANNE SHEEL ALDRESS CITY-51-2P INTE DELETE DELETE 15 ITHE Change Addition Addition ANNE SHEEL ALDRESS CITY-51-2P ORLANDO FL ORLETE 15 ITHE Change Addition Addition ANNE SHEEL ALDRESS CITY-51-2P ORLETE ADAMS SHEEL ALDRESS CITY-51-2P ORLANDO FL ORLETE ADAMS SHEEL ALDRESS CITY-51-2P ORLETE ADAMS SHEEL ALDRESS SHEEL ALDRESS CITY-51-2P ORLETE ADAMS SHEEL ALDRESS CITY-51-2P ORLANDO FL Change Addition ADAMS ADITIONS/CHANGES OFFICERS AND DIRECTORS IN 12 ADAMS					84 City		F=1	85 Zip (Code	
SIGNATURE Signature types or justed Extension dispositional disposit	44 50	003.0	2500 CO7 1500 Florida Ct	dos Nos			PL.	, l	to registered	
DCP		Signature, typed or proted name of registined	agent and title if applicable (N	OTE Register		iture required when reinstating)	DATE			
NAME STREET ADDRESS STAFF ADDRESS STREET ADDRES						ADDITIONS/CHANGES TO	O OFFICERS AND			
STREET ADDRESS CTIV_ST_7P ORANDO FL		. – .	L DELETE	•		†		L Change	Addition	
City St 2PF ORLANDO FL				I		20				
DELETE DELETE 21 TITLE				1		55				
ADAMS, KAREN M. 8134 OAKLAND PLACE 23 STREET ADDRESS			DELETE					Change	Addition	
City-St-ZiP		ADAMS, KAREN M.		1					_	
TITLE	STREET ADDRESS	8134 OAKLAND PLACE		2.3 5	TREET ADDRES	ss				
NAME		ORLANDO FL		2.4	CITY-ST-ZIP					
STREET ADDRESS 33 STREET ADDRESS 34. City - \$1-2ip			☐ DELETE					Change	Addition	
CITY-ST-ZIP	NAME			321	NAME					
TITLE	STREET ADDRESS			333	STREET ADDRES	ss				
NAME			——————————————————————————————————————					1 6	1 4445	
STREET ADDRESS 4.4 CITY - ST - ZIP			[_] DELETE					∟ ⊔ ⊔nange	L Addition	
CITY-ST-ZIP				1		nn				
DELETE						20				
NAME			DELETE					Change	Addition	
STREET ADDRESS			L., OLCCIC							
CITY - ST-7/P						ss				
TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7IP 6.4 CITY-ST-7IP										
SIREFT ADDRESS CITY - ST - 74P 6.3 STREET ADDRESS 6.4 CITY - ST - 74P			DELETE				_ 	Change	Addition	
SIREFT ADDRESS CITY - ST-74P 6.3 STREET ADDRESS 6.4 CITY - ST-74P				6.21	NAME	1				
CITY-ST-7/P 6.4 CITY-ST-7/P	i									
	STREET ADURESS			6.3	STREET ADDRES	ss				

APRIL 4, 1997

407-841-8929

Daytime Phone #

0091186