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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

## **FILED** Apr 21 1998 8:00am Secretary of State

UNIVE	RSAL TRUCK PARTS & SA	ALES INC.				
Principal Plac	e of Business	Mailing Address				HERN GLOSS BLEIN BIBIL BIBLL 1861
4171 L. B. K	MCLEOD RD.	4171 L. B. MCLEOD	RD.			
ORLANDO FL 32811 ORLANDO F					DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualified	3 01 705
					08/24/1992	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3139526	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		6. Certificate of Status Desired	Fee Required	
City & Stat	le	City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be
28			,		Trust Fund Contribution	Added to Fees
Zip	Country	Zip 1.00	Country	y	8. This corporation owes or has paid the o	
24	25   9. Name and Address of Curre	29 ent Registered Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Registere	XYes No
147		in Aliandian Wallin	81	Name	10. Hanne and Londings of their Hafferfale	
	TLLIS, LEON F., JR.					
	134 OAKLAND PLACE		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
U	RLANDO FL 32819		83	<del> </del>		
			ļ			- N. P
			84	City	F	85 Zip Code
office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the obligation of the production of the state of the st	igations of, Section 607.0505	latules, the abovivas authorized b 5, Florida Statule (NOTE Hegistered Ag	s.	poration submits this statement for the purpose than a board of directors. I hereby accept the a pred when reinstating)	of changing its registered pointment as registered
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DCP	DELETE	1.1 1111.6		···	Change Addition
NAME	WILLIS, LEON F., JR.		1.2 NAME			
STREET ADDRESS	8134 OAKLAND PLACE		1.3 STREE	1 ADDRESS		
CITY-ST-ZIP	ORLANDO FL		14 CHY-	S1 - 7IP		
TITLE	DS	L_I DELETE	211111			Change Addition
NAME	ADAMS, KAREN M.		2 2 NAME			
STREET ADDRESS	8134 OAKLAND PLACE		23 STRFE	1 ADDRESS		ļ
CITY-ST-ZIP	ORLANDO FL	——————————————————————————————————————	2. 4 CITY-	S1-ZIP		AL CONTRACTOR
TITLE		DETELE	B			Change Addition
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DETETE	3.4. CITY-	S1-ZIP		Change Addition
		נייין נינונונ				L vitalige ( Routilot)
NAME CTOLCT ADDDESS	1		4. 2 NAME	<b>I</b>		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE	<del> </del>	DELETE	4.4 CITY - 5 1 TITLE	31- <i>E</i> Ir		Change Addition
NAME	}		5.2 NAME			
STREET ADDRESS			1	I ADDRESS		
CITY-ST-ZIP			5.4 CHY-			j
TITLE		D OCLETE		21.21		Change Addition
NAME		<u></u>	6.2 NAME	Ì		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			64 CITY-5			
0111-01-20	<del></del>	والان المستعدد برده عاريان الورسا وارتد	040117-3	<u> </u>		

Thereby certify that the information supplied with this filing does not qualify for the excindicated on this annual report or supplier eight annual report is true and accurate any officer or director of the corporation or the receiver or trusted empowered to be sourch block 12 or Block 13 if changed or an attachment with an address. vion stated in Section 119.07(3)(i), Florida Statutes. Flurther certify that the information of my signature shall have the same legal effect as if made under oath; that I am an peport at Jequired by Chapter 607, Florida Statutes; and that my name appears in

407-841-8929