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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G01958

(9)

RAY'S TIRE AND SERVICE CENTER, INC.

FILED Apr 21 1997 8:00am Secretary of State



Principal Place 1375 US 1. SC ST. AUGUSTIN US	HTU	11 S	Mailing Address 1375 US 1. SOUTH ST. AUGUSTINE FL 32086-4230 US								
							Date Incorporated or Qualified 09/29/1982		te of Las 25/199	st Report	7
2. Principal Place of Business			2a. Mailing Address						Applied For		
21			26			59-2225750 Not Applicable				le	
Sulte, Apt. #, etc.			Suite. Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country		Zip Country		try		8. This corporation has liability for intangible tax under s. 199.032,				
24	25		l	30		· · · · · · · · · · · · · · · · · · ·	Florida Statutes Yes No				
		ess of Current Regis	stered Agent		11	Name	10. Name and Address of New Rec	istered /	igent		
	IER, RAYMOND			l°	`'	name					- 1
1375 U.S. 1 SOUTH ST AUGUSTINE FL 32086			82			Street Addr	ess (P.O. Box Number is Not Acceptabl	e)			7
817	AUGUSTINE PL 3208	6		ļ _ē	3						\dashv
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				8	4	City		FL	85 7	7ip Code	1
44 Pursuent	to the provisions of Sec	tions 607 0502 and 6	607 1508 Florida Statut	es the abo)/6)-t	named core	oration submits this statement for the or		<u>L</u> L	n its registere	7
office or r agent. I a	egistered agont, or bot m familiar with, and acc	n, in the State of Flor cept the obligations o	ida. Such change was a of, Section 607.0505, Fla	authorized orida Statul	by tl	he corporat	oration submits this statement for the prior's board of directors. I hereby accep	the app	ointment	as registered	
SIGNATURE			4	eria. e. e eesta			ed when reinstating)		,-,		
12.	Signalure, lyped or printed nam	OFFICERS AND DIRE		13.	Ageni	s-gnature requir	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIREC?	IORS IN 12	\dashv_i
TITLE	STD	AT ROLLING PARTY DATE	DELETE	1.1 701.8			ADDITIONS/OFFMICE TO OFFICE	CHO MIL	Chang		§
NAME	USHER, MERIAL		1.21								
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NAME				6.2 NAM							
STREET ADDRESS				6.3 STRE							
CITY-ST-ZIP	by cortify that the inform	nation supplied with t	this filing does not quali	64 CITY			in Section 119.07(3)(i). Florida Statutes	Lfurther	certify t	hat the	{

I hereby certify that the information supplied with this many does not qualify for the exemption stated in section 119.07(3)(f). Florida Statutes. Thories 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 logal effect as if made notification 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 12 if chapted, or on an attachment with an address.

3-13-97