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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

1. Corporation	NY TIRE AND PARTS, INC.								
Principal Place	of Business	Mailing Address	Mailing Address			1	i (Digilio Rila Azita talat tibin ilgie ciat Ri	ALE BINEL MINIC ARNEL DI	Oli Bidil Idbi
1301 SW 2 ST POMPANO BCH FL 33069 US		1301 SW 2 ST POMPANO BCH FL 33069 US			DO NOT WRITE IN T	HIS SPACE			
						3.	Date Incorporated or Qualifed 04/23/1987		
Principal Place of Business 2a. Mailing Address						4.	, FEI Number	Apr	olied For
21		26					59-2844234	,	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certifcate of Status Desired	\$8.75 A	
22		27						Fee Rec	
City & State	e 	City & State				Election Campaign Financing Trust Fund, Contribution	\$5.00 r Added to		
Zip Country		Zip 3	h ' m '			This corporation owes the current year Intangible Personal Property Tax.			
<u>'</u>	g. Name and Address of Curren	t Registered Agent		_		10.	Name and Address of New Register	ed Agent	
110	U DUCE DAIN		81	1	Name				
MC ALDUFF, PAUL 1301 SW 2 ST			82	2	Street Addre	ess (F	P.O. Box Number is Not Acceptable)		
POM	PANO BCH FL 33069		83	3			••		
			84	•	City		The state of the s	85 - Zip C	òde
office or re	egistered agent, or both, in the State in familiar with, and accept the obligations. Signature, typed or printed name of registered agei	of Florida. Such change was autitions of, Section 607.0505, Florid	thorized by da Statute:	/ th s.	ne corporatio	on's Do		opointment as reg	hstelea
12.		ID DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS	~	
TITLE	PD	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	MC ALDUFF, PAUL		1.2 NAME						
STREET ADDRESS	1301 SW 2 ST		1.3 STREE						
CITY-ST-ZIP TITLE	POMPANO BCH FL 33069 VSD			1.4 CITY-ST-ZIP 2.1 TITLE				[] Change	Addition
NAME	MC CARTHY, RICHARD	-		2.2 NAME				<u> </u>	
STREET ADDRESS	1301 SW 2 ST		2.3 STREE		DODRESS				
CITY-ST-ZIP			1	2.4 CITY-ST-ZIP			'		
TITLE	1 0 11 11 10 2011 12 00000	☐ DELETE	3.1 TITLE	<u> </u>				☐ Change	☐ Addition
NAME			3.2 NAME						
STREET ADDRESS	3		3.3 STREE	3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-	ST-	ZIP				
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAME	Ξ					
STREET ADDRESS			4.3 STREE	ET A	DDRESS		•		
CITY-ST-ZIP			4.4 CITY-	ST-2	ZIP			Channa	- Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME					☐ Change	Addition
NAME			5.3 STREE		noncee		•		
STREET ADDRESS			5.4 CITY-S		i				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE					☐ Change	Addition
TITLE			6.2 NAME						
NAME STREET ADDRESS			6.3 STREE		LODRESS				

CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS