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**May 06 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # M49772 (0)
1. Corporation Name
AMERICAN TIRE AND AUTO REPAIRS INC.



Principal Place of Business
**2037 JOHNSON ST.
HOLLYWOOD FL 33020**

Mailing Address
**2037 JOHNSON ST.
HOLLYWOOD FL 33020-3508**

2. Principal Place of Business

21 **7844 NW 44th St.**

Suite, Apt. #, etc.

22

City & State

23 **SUNRISS**

Zip

24 **FL 33351**

Country

25

2a. Mailing Address

26 **7844 N.W. 44th St.**

Suite, Apt. #, etc.

27

City & State

28 **SUNRISS**

Zip

29 **FL 33351**

Country

30 **U.S.A.**

3. Date Incorporated or Qualified
04/06/1987

3a. Date of Last Report
08/12/1996

4. FEI Number
59-2794652

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

**KHAN, JOE AMIN
1551 S.W. 87 TERRACE
PEMBROKE PINES FL 33025**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** DELETE

NAME **KHAN, JOE AMIN**
STREET ADDRESS **1551 S.W. 87 TERR.**
CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE **ST** DELETE

NAME **KHAN, ZAIRA**
STREET ADDRESS **1551 SW 87TH TERR**
CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

Joe A. Khan 11-28-97 (957) 741-6602

CR2E034 (9/96)