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Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # **M63950** **(3)**

1. Corporation Name
CABRERA TIRES CORPORATION

Principal Place of Business	Mailing Address
7705 NW 72 AVENUE POST OFFICE BOX 3491 HIALEAH FL 33013	PO BOX 2651 HIALEAH FL 33012-0651 US

3. Date Incorporated or Qualified: 12/23/1987
3a. Date of Last Report: 01/25/1996

2. Principal Place of Business — 21 Street, Apt. #, etc. — 22 City & State — 23 Zip — 24 Country — 25

2a. Mailing Address — 26 Street, Apt. #, etc. — 27 City & State — 28 Zip — 29 Country — 30

4. FEI Number: 65-0021913 ☐ 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

CABRERA, PASTOR H.
480 E. 38 STREET
HIALEAH FL 33013

10. Name and Address of New Registered Agent

81 Name: CABRERA FRANCISCA H
82 Street Address (P.O. Box Number is Not Acceptable): 42 W. 44 ST.
83
84 City: HIALEAH FL 85 Zip Code: 33012

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: Francisca Cabrera — DATE

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE: PD NAME: CABRERA, PASTOR STREET ADDRESS: 480 E. 38 STREET CITY-ST-ZIP: HIALEAH FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS: 42 W. 44 ST. 1.4 CITY-ST-ZIP: HIALEAH, FL. 33012	☒ Change	☐ Addition
TITLE: STD NAME: CABRERA, FRANCISCA H. STREET ADDRESS: 480 E. 38 STREET CITY-ST-ZIP: HIALEAH FL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS: 42 W. 44 ST. 2.4 CITY-ST-ZIP: HIALEAH, FL. 33012	☒ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change	☐ Addition

CR2E034 (9/96)

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: Francisca Cabrera — 03/16/97 — 305-885-2525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone #

FRANCISCA H. CABRERA- PRESIDENT

0115998