2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P96000087976**

1. Entity Name TIRE REMANUFACTURING, INC. Mailing Address Principal Place of Business 2759 WEST 5TH STREET 2759 WEST 5TH STREET STE #2 STE #2 IACKSONVILLE FL 32254 JACKSONVILLE FL 32254-2068 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

FILED Apr 27, 2000 8:00 am Secretary of State

04-27-2000 90055 031 ***150.00



DO NOT WRITE IN THIS SPACE

City & State		City & State		FEI Number 59-341162	21	<u> </u>	pplied For ot Applicable	
Country	Zip Country		5.	#0.75 A LINE (ditional	
e and Address of Current Re	gistered Agent		7.	Name and Address of New	Registered A	gent		
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DUSS, JOHN S IV 10110 SAN JOSE BLVD. JACKSONVILLE FL 32257			Street Address (P.O. Box Number is Not Acceptable)					
: FL 32257								
			City		FL	Zip Cod	е	
ty submits this statement for the	ne purpose of changing i	its registered o	office or registered ag	zent, or both, in the State of F	lorida.	<u> </u>		
ty oddinio and otatomore to a	to parpage or energing .	/ 0 8 / 0 10 10 11 1		, ,				
d or printed name of registered agent and	title if applicable. (NO	OTE: Registered Ag	ent signature required when r	reinstating)	DATE		<u></u>	
Tax filling requirement and elects to do so. After MAY 1, 2000			\$150.00	10. Flection Campaign Financing		. \$5.0	• \$5.00 May Be	
				Trust Fund Contribution. Added to				
	<u> </u>			DDITIONS/CHANCES TO OF	EICEDO AND	DIBECTOR	C INI 11	
OFFICERS AND DI			AL	DUITIONS/CHANGES TO OF			Addition	
DEBORAH M	L_J Delete	NAME				C Ontarige	L radition	
		i	DDRESS					
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EURA BEACH FL						Change	Addition	
ISO PETER A	Delete			•		Change	L_ AUGINON	
			DORESS					
		CITY-ST-	ZIP					
	☐ Delete	TITLE				☐ Change	Addition	
		NAME						
NVILLE FL 32257			ZIP					
	☐ Delete					∟_ Change	☐ Addition	
			ODRESS					
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	20,00	NAME				-		
		STREET A	DORESS					
- 603 - ii	e and Address of Current Re S IV SE 8LVD. E FL 32257 ity submits this statement for the dorpointed name of registered agent and gible to satisfy its Intangible and elects to do so.	e and Address of Current Registered Agent S IV SE BLVD. E FL 32257 ity submits this statement for the purpose of changing and or printed name of registered agent and title if applicable. (No. 1) Gible to satisfy its Intangible and elects to do so. OFFICERS AND DIRECTORS DEBORAH M ATA NO, #318 VEDRA BEACH FL Delete REX R ATA NO, #318 VEDRA BEACH FL IISO, PETER A IE GREENS WAY, #6 INVILLE BEACH FL OHN S IV AN JOSE BLVD.	e and Address of Current Registered Agent S IV SE BLVD. E FL 32257 In a second or printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you printed name of registered agent and title if applicable. If you print name is registered a	e and Address of Current Registered Agent Name Street Address (P.O. 6 Street Address (P.O. 6 Street Address (P.O. 6 Street Address (P.O. 6 City City dity submits this statement for the purpose of changing its registered office or registered agent and utle if applicable. (NOTE: Registered Agent signature required when glible to satisfy its Intangible and elects to do so. FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. All Delete ITILE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OHN S IV AN JOSE BLVD. NVILLE BEACH FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP OHN S IV AN JOSE BLVD. NVILLE FL 32257 Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete ITILE Delete ITILE NAME STREET ADDRESS CITY-ST-ZIP Delete ITILE TITLE TITLE	Country Country Country Country S. Certificate of Status Desired 7. Name and Address of New I Name Street Address (P.O. Box Number is Not Acceptable Street Address (P.O. Box Number is Not Acceptable City City City City City City City In the State of F City City City City City City City City City In the State of F City City In the State of F City In the State of F City City City In the State of F City City	Country Zip Country 5. Certificate of Status Desired \$ 8. Name Street Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) E FL 32257 City FL ity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. due proved name of registered agent and tole 4 applicable. (NOTE Registered Agent signature required when remaining) DATE gible to satisfy its Intangible and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DEBORAH M 11 NO, #318 VEDRA BEACH FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE DELETE STREET ADDRESS CITY-ST-Z	Country Zip Country 5. Certificate of Status Desired \$8.75 Act Fee Require and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code (City FL Zip Code (City FL Zip Code (City Structure)) The Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code (City FL Zip Code (City Structure)) Address (P.O. Box Number is Not Acceptable) FL Zip Code (City FL Zip Code (City Structure)) Address (P.O. Box Number is Not Acceptable) FL Zip Code (City FL Zip Code (City Structure)) Address (P.O. Box Number is Not Acceptable) FL Zip Code (City Structure) City FL Zip Code (City Structure) FL Zip Code (City Structure) Address (P.O. Box Number is Not Acceptable) City Structure required deem rorizonal (City Structure) Address (P.O. Box Number is Not Acceptable) City Structure required deem rorizonal (City Structure) Address (P.O. Box Number is Not Acceptable) City Structure required deem rorizonal (City Structure) Address (P.O. Box Number is Not Acceptable) City Structure required deem rorizonal (City Structure) Address (P.O. Box Number rorizonal (City Structure) Address (P.	

changed, or on an attachment with an address, with all other like empowered.