

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000065338

**FILED  
Mar 08, 2013  
Secretary of State  
CC7640656966**

**Entity Name:** IZZY'S TIRE & SERVICE / G.A.S. INC

**Current Principal Place of Business:**

10173 HWY 441 N  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

10173 HWY 441 N  
OKEECHOBEE, FL 34972 US

**FEI Number:** 46-0656901

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MENENDEZ, GEORGE E  
10173 HWY 441 N  
OKEECHOBEE, FL 34972 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name MENENDEZ, GEORGE E  
Address 5601 SE 116TH PL  
City-State-Zip: OKEECHOBEE FL 34974

Title VP  
Name MENENDEZ, JOSEPH E  
Address 5601 SE 116TH PL  
City-State-Zip: OKEECHOBEE FL 34974

Title S  
Name MENENDEZ, LORI A  
Address 5601 SE 116TH PL  
City-State-Zip: OKEECHOBEE FL 34974

Title TR  
Name MENENDEZ, LORI A  
Address 5601 SE 116TH PL  
City-State-Zip: OKEECHOBEE FL 34974

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LORI MENENDEZ

**SECRETARY**

**03/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date