SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 343035

(2)

WEST COAST TIRE CO., INC  Principal Place of Business  Mailing Address  14725 N. FLORIDA AVENUE TAMPA FL 33613  TAMPA FL 33613									
							<ol> <li>Date Incorporated or Qualifine 03/17/1969</li> </ol>		Date of Last Report 6/ <b>09/1995</b>
2. Principal Pl	lace of Busin	ness	2a. Ma	ailing Address			4, FEI Number	0	Applied For
1			26	-			59-1260914		Not Applicab
Suite, Apt. a	#, etc		Su	ite, Apt. #, etc.			5. Certificate of Status Desired	<b>.</b> NJ	\$8.75 Additional
2 City & Casts			27		· · · · · · · · · · · · · · · · · · ·		U. Goldingar of Caros Desired		Fee Required
City & State	е		28	ty & State			6. Election Campaign Financing	g []	<b>\$5.00</b> May Be
Zip		Country	Zır	3	Countr	······································	Trust Fund Contribution  8. This corporation has liability	for interestable	Added to Fees
4		25	29		30	,	Flooda Statutes	Yes	No Bis course 199/025
	9. Name	and Address of Currer	nt Registere	d Agent			10. Name and Address of New	Registered	Agent
THC	DRNHILL,W	ILLIAM T			81	Name			
114 LAKE DR.					82	Street Add	tress (P.O. Box Number is Not Accep	plable)	
LUT	IZ FL				83	2			
					0.	<u></u>			
					84	City		FI	85 Zip Code
onice or re	egistered ag	ent, or both, in the State	of Florida S	508, Florida Stati	authorized by	the corporat	ion's board of directors. Thereby acc	cept the appo	ointment as recustered
agent. I ar	egisiered ag m tamiliar wi	jent, or both, in the State ith, and accept the obligation of printed name of registered age OFFICERS AN	ations of, Sec	such change was ction 607.0505, F	authorized by lorida Statute OTE Registered Ag	, the corporat s.	ion is board of directors. I hereby acc ired when renstating)	DATE	
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agent. I ar  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature typed  S ABDONE 1913 O/ TAMPA,	lent, or both, in the State lith, and accept the obligation printed name of registered age OFFICERS AN EY, MICHAEL O.	ations of, Sec	oction 607,0505, F	authorized by florida Statute:  OTE Registered Ag  13.  11TITLE  1.2 NAME  1 3 STREE  1 4 CTY	y the corporation of the corpora	ion is board of directors. I hereby acc ired when renstating)	DATE	D DIRECTORS IN 12 Change Addition
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