FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 343035

(2)

WEST COAST TIRE CO., INC

/--

FILED

May 01 1998 8:00am

Secretary of State

						0) 0\10 010 010 0 010 0\0\4 PAR	
Principal Place of Business Maiting Address							
14725 N. FLORIDA AVENUE 14725 N. FLORIDA AVENU			Ē				
TAMPA FL 33613		TAMPA FL 33613		DO NOT WRITE IN THIS SPACE.			
					3. Date Incorporated or Qualified		
					03/17/1969		
9 Principal P	Place of Business	2a, Mailing Address			4. FEI Number	Applied For	
	add of Eddinosts	26			59-1260914	Not Applicable	
26 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional	
22 27					5, Certificate of Status Desired	Fee Required	
	City & State City & State				6. Election Campaign Financing	\$5,00 May Be	
23	26				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current vear Intangible	
24	25 29 30		5]		Personal Property Tax due June 30. X Yes No		
	9. Name and Address of Currer		<u>-, </u>		10. Name and Address of New Registers	d Agent	
TU			81	Name	THOMUSIC - Julie 0		
	ORNHILL, WILLIAM T				THUNKING TULLE A	3	
114 LAKE DR. Lutz Fl			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
ŁU	IZ FL		83				
•			[]		LUT2, F/4 33549		
			84	City	F	85 Zip Code	
		LOOZ IEGO CILIZA OLIVA				—	
11. Pursuant office or	to the provisions of Sections 607.050 registered agent, or both, in the State	iz and 607,1508, Florida Statutes. of Horida. Such change was aut	, the above horized by	named ci the corpo	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	appointment as registered	
agent. I a	am familiar with and accept the oblig	ations of Gection 607.0505, Floric	da Statutes		41.14	. /4.50	
SIGNATURE	Chile a-	Thompsell			7/2	2/98	
	Signature, typed or finted name of registered rigit			rt signature re	equired when reinstating) CHANGES TO OFFICERS A	NIC DIRECTORS IN 12	
12.	OF ICERS AIN	D DIRECTORSDELETE	13. 11 111LE	Т	VICE PRESIDENT	Change Addition	
TITLE	APPONEY MOUNT O	L. Deter			PICE PACAINIANI	A	
NAME	ABDONEY, MICHAEL O.		12 NAME				
STREET ADDRESS	1913 OAKMONT AVE		1 3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA, FL 00000	000 14		I - ZIP		Change Addition	
TITLE	V	DELETE	2 1 TITLE			C cuarde C various	
NAME	(IECELIALI) DITTIO		22 NAME				
STREET ADDRESS	919 CIMMERON DR		2.3 STREET ADDRESS		•		
CITY-ST-ZIP	TAMPA, FL 00000		2. 4 CITY - ST - ZIP		/A	Channe L Addition	
TITLE	D'	L_J DEL e te	3.1 TITLE		PRESIDENT	Change Addition	
NAME			3.2 NAME				
STREET ADDRESS	303 S BRYAN RD STE 1		3.3 STREET	ADDRESS			
CITY-ST-ZIP	BRANDON FL		3.4. CITY - 5				
TITLE	P	DELETE	4.1 TITLE		SECAETARY LILL	Change Addition	
NAME	THORNHILL, WILLIAM T		4. 2 NAME		THURNAILLYUILE H		
STREET ADDRESS	114 LAKE DR		4.3 STREET	ADDRESS	THURNHILL, JULIEA 114 LAKE DR		
CITY-ST-ZIP			4.4 CITY - S		LUTZ, FIA 33549		
TITLE]	☐ DELETE	5.1 TITLE		<i>'</i>	Change Addition	
NAME			5.2 NAME	}			
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S	1-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6 2 NAME				
STREET ADDRESS	1,3		6.3 STREE I	ADDRESS			

14. I 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.