

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 08:00 A
Secretary of State

DOCUMENT # 349988

1. Entity Name
SUNRISE O.K. TIRES, INC.



Principal Place of Business
**1013 WEST SUNRISE BLVD
FT LAUDERDALE, FL 33311**

Mailing Address
**1013 WEST SUNRISE BLVD
FT LAUDERDALE, FL 33311**



01112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1270123	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HUNTER, F VERNON
1911 NE 52ND COURT
FT LAUDERDALE, FL**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HUNTER, F VERNON
STREET ADDRESS 1911 NE 52ND CT
CITY-ST-ZIP FT LAUDERDALE, FL

TITLE SD
NAME HUNTER, JUDITH
STREET ADDRESS 1911 NE 52ND CT
CITY-ST-ZIP FT LAUDERDALE, FL

TITLE V
NAME HUNTER, F. VERNON, II
STREET ADDRESS 1911 N.E. 52ND CT.
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE: *F. Vernon Hunter* **F. VERNON HUNTER** 1-15-08 954-763-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #