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 # 511912

(8)

FILED Feb 17 1998 8:00am Secretary of State

FUZZY'S TIRE CENTER, INC.	12 (0 ,							
Principal Place of Business Mailing Address					- LABORAT BITOLYTEOL KIDNA IRLIK TÄÄKÄ KIÖT OLOTI BKELT BYÖK OLAKY ELEKI SKOTT 1001				
800 NORTH STATE ROAD 7 PLANTATION FL 33317	800 NORTH STATE ROAD 7 PLANTATION FL 33317				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified 09/08/1976				
2. Principal Place of Business	26. Mailing Address				4, FEI Number		Applied For		
21	26				59-1714869		Not Applicable		
Suite, Apt. #, etc.	Suite, Apt	#, etc.			5. Certificate of Status Desired	· · · · ·	75 Additional a Required		
City & State	City & State	e			6, Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees		
Zip Country 25	Z(p	70 30	untry		8. This corporation owes or has paid the curr Personal Property Tax due June 30.	ent yea	ar Intangible		
9. Name and Address of Cu			[10. Name and Address of New Registered A	gent			
FAZZINI, ANITA M 1941 SW 75TH TERR PLANTATION FL 33317			81 82 83	Name Street Addre	dress (P.O. Box Number is Not Acceptable)				
			84	City	FL.	85	Zip Code		
 Pursuant to the provisions of Sections 607 office or registered agent, or both, in the S agent. Lam familiar with, and accept the or 	State of Florida. Such cha	ange was authorize	ed by	the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the apport	changi xintmer	ing its registered nt as registered		
SIGNATURE Signature typed or printed pane of registers	of rigeral and title if approximation	(NOTE: Registere	nd Ager	nt signature required	d when reinstaling) DATE				

agent fa	m familiar with, and accept the obligations of	, Section 607.0505, Fid	orida Statutes			_	
SIGNATURE	Signature, typed or printed purple of complete of recent and title	duorestable (NOTI	F Registered Agent signature requi	ired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.		O OFFICERS AND DIRECTOR	RS IN 12	
TITLE	D	DELETE	1 1 TITLE		☐ Change	Addition	
NAME	Fazzini, emery J.		1 2 NAME				
STREET ADDRESS	1941 SW 75TH TERR.		13 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL		1.4 CiTY-ST-ZIP				
TITLE	ST	DELETE	21 TITLE		☐ Change	Addition	
NAME	FAZZINI, ANITA		2.2 NAME				
STREET ADDRESS	1941 SW 75TH TERRACE		2.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL	_	2.4 CITY-ST-ZIP				
TITLE	PD	DELETE	3.1 TITLE		☐ Change	Addition Addition	
NAME	FAZZINI, JOHN		3.2 NAME				
STREET ADDRESS	12315 NW 5TH PLACE		3.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL	_	3 4. CITY+ST-ZIP				
TITLE		DELETE	41 TITLE		☐ Change	☐ Addition	
NAME			4. 2 NAME	•			
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE		☐ Change	Addition	
NAME			5.2 NAME				
STREET ADORESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			.5.4 CITY-ST-2IP				
TITLE		DELETE	6.1 TITLE		☐ Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-7IP			6 4 CITY - ST - ZIP				

14. Thereby 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 suppliemental enrual 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 changes or on an attrictment with an address.

SIGNATURE:

2-11-98

CR2E034 (