## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation N					
CB TIRE	E, INC.			LEADER DAN AND AND AND AND AND A	
Principal Place o	of Business	Mailing Address	··		år Billin diði) þiðin bildin bildin þigni deði
12400 NW 7TH AVENUE 12400 NW 7TH AVE		12400 NW 7TH AVENU	Ε		
NORTH MIAMI		NORTH MIAMI FL 3316	8		
				3. Date Incorporated or Qualified 02/01/1978	3a. Date of Last Report 04/11/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26		59-1795447	Not Applicable  \$8.75 Additional
		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		Oity & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has flability for in	
4	25	29	30	Florida Statutes Yes  10. Name and Address of New Re	
	9. Name and Address of Current	nt Registered Agent	81 Name	IV. Name and Address of New Re	Ateroleg Wholir
CRISONINO, RICHARD A 2534 SW 6 STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable	9)
			83		
miami fi	_ 33135				
			84 City		FL 85 Zip Code
	h, and accept the obligations of, Sec	et om 607.0505, Flor da Statute:	S	oration sythmas this statement for the pulp and of directors. Thereby accept the appoi	
SIGNATURE _	Signatura. Upped or parabilitations of respectively.	tanto nos diaggal lable - 194	S.  O't Gay as a dag at a goar water in  13.		DERS AND DIRECTORS IN 12
SIGNATURE _	Signatura. Upped or parabilitations of respectively.		of Ellisay as acid Agent signar will will in	end when much shallings	DATE
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SIGNATURE  12.  TITLE  NAME	OFFICERS AND MARGOTTA, VINCE 3231 SW 64TH TERRACE	Carcino Tappi (84 * *** ND DIRECTORS	13.	end when much shallings	CIATE DERS AND DIRECTORS IN 12
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14. 1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x). Florida Statutes I further certify that the information indicated on this annual report is 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 configuration 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 I3 if changed is on an attachment with an address. SIGNATURE: