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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 852609

(7)

1. Corporation Name

UNITED TIRE & RUBBER CO. LIMITED

Principal Place of Business

275 BELFIELD RD. REXDALE
REXDALE, ONTARIO
M9W 5C8 CANADA

Mailing Address

275 BELFIELD RD. REXDALE
REXDALE, ONTARIO
M9W 5C8 CANADA



3. Date Incorporated or Qualified

04/16/1982

3a. Date of Last Report

07/16/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BRECKER, CHARLES D ESQ.
20801 BISCAYNE BLVD. #505
AVENTURA FL 33180

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typewritten printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	TCFO	<input type="checkbox"/> DELETE
NAME	FERNANDES, RAYMOND	
STREET ADDRESS	257 YORKSHIRE DR	
CITY - ST - ZIP	NEWMARKET, ONTARIO CANADA L3Y -6K9	
TITLE	PM	<input type="checkbox"/> DELETE
NAME	SHERKIN, CHARLES	
STREET ADDRESS	P#13, 3181 BAYVIEW AVENUE	
CITY - ST - ZIP	NORTH YORK, ONTARIO	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MCCLURE, JOHN	
STREET ADDRESS	4045 SASHA COURT	
CITY - ST - ZIP	MISSISSAUGA, ONTARIO L4W 3K9	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KIRSCH, JEFFREY	
STREET ADDRESS	40275 RECKFIELD ROAD	
CITY - ST - ZIP	REXDALE, ONTARIO M9W 5C6	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	PENSLER, SANFORD	
STREET ADDRESS	405 LEXINGTON AVENUE, 37TH FLOOR	
CITY - ST - ZIP	NEW YORK NY 10174	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	PENSLER JAY
1.4 CITY - ST - ZIP	405 LEXINGTON AVENUE, 37TH FLOOR NEW YORK, NY 10174
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	ROY, JEFFREY
2.3 STREET ADDRESS	SUITE 5800, SCOTIA PLAZA, 40 KING ST. W.
2.4 CITY - ST - ZIP	TORONTO, ONTARIO M5H 3Z7
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *[Signature]* J. FERNANDES, APRIL 8, 1997 (414) 575-3077
C.F.O.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0529537

CR2E034 (9/96)