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 #

(8)

RETREAD CORPORATION OF FLORIDA, INC.

FILED

May 05 1998 8:00am

Secretary of State

Principal Pla	ice of Business	Mailing Address					
					İ		
SUITE 406		2301 PARK AVE SUITE 406	SUITE 406				
ORANGE PARK FL 32073 ORANGE PARK FL 3207			073	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
	To 11 - 24				12/11/1984		
	Place of Business	2e. Mailing Address			4. FEI Number		Applied For
21		26			59-2466071		Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Regulred
City & State		City & State	City & State		6. Election Campaign Financing	\$5.0	0 May Be
23	28				Trust Fund Contribution		d to Fees
Zip	Country	Ζιρ	Cou	ntry	8. This corporation owes or has pa	aid the current year i	Intangible
24	25	29	30		Personal Property Tax due June		□No
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agent	
TO	OLSON, JOHN F JR			81 Name			
2301 PARK AVE				82 Street Addr	ress (P.O. Box Number is Not Acceptat	nla)	
SUITE 408				Oli Oct / tab.	1900 (F.C. DOX 140/10C) IS 1401 ACCEPTAGE	3107	
	RANGE PARK FL 32073			83			
				04 03:			
•				84 City		FL 85 Zi	p Code
11. Pursuant	t to the provisions of Sections 607.	.0502 and 607.1508, Florida Stat	tutes, the at	ove-named corp	poration submits this statement for the p	virnoes of changing	its registered
Office of	registered agent, or both, in the S am familiar with, and accept the ol	tate of Florida. Such change wa	is authorized	d by the corporat	tion's board of directors. I hereby accept	ot the appointment a	as registered
_		brigations of brotton our local.	i ionda olai	u103.			İ
SIGNATURE	Signature, typed or printed name of registered	d agont and title if applicable (N	IOIE Registered	Agent signature requir	red when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	PD	☐ DELETE	1.1 Tr	LE		☐ Change	Addition
NAME	TOLSON, JOHN F JR		1.2 N	ME			
STREET ADDRESS 2301 PARK AVE., STE 408		3	1.3 STREET ADDRESS				
CITY-ST-ZIP ORANGE PARK FL 32073			1.4 City-St-ZiP				İ
TITLE		DELETE	2.1 T/I			Change	Addition
NAME			2.2 NA	ME			
STREET ADDRESS				REET ADDRESS]
CITY-ST-ZIP	1			TY-ST-ZIP			1
TITLE		☐ DELETE	3.1 117			Change	Addition
NAME	1		3.2 NA	4			
STREET ADDRESS				REET ADDRESS			!
CITY-ST-ZIP				ry-St-ZIP			İ
TITLE		DELETE	4.1 19		, , , , , , , , , , , , , , , , , , ,	Change	Addition
NAME			4. 2 N/	1		Shange	
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
TITLE		DELETE	5.1 T/T			Change	- Addition
NAME			5.1 M			C Change	C AUDITOR
STREET ADDRESS							ļ
				REET ADDRESS			1
CITY-ST-ZIP TITLE	 	DELETE		Y-ST-ZIP		Cherry	A delicion
	1	E. DELETE	6.1 TIT	l		☐ Change	Addition
NAME PERSONAL ADDRESS	1		6.2 NA	1			
STREET ADDRESS			1	REET ADORESS	-		ŀ
CITY-ST-ZIP	1		■ 64 CIT	Y-ST-21P			- 1

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.

SIGNATURE:

(904) 269 DOSO