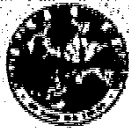


**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 MAY -1 AM 3:05

**DOCUMENT # H61736 (5)**

1. Corporation Name  
**F & D TIRE CENTER, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**11980 SW 8TH ST. MIAMI FL 33184** **11980 SW 8TH ST. MIAMI FL 33184**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/12/1985** 3a. Date of Last Report **04/07/1994**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 25 Suite, Apt. #, etc.

22 City & State 27 City & State

24 Zip 25 Country 29 Zip 30 Country

4. FEI Number **59-2547750** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FERNANDEZ, ANGEL F.  
11980 SW 8TH ST.  
MIAMI FL 33184**

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 agree to the obligations of, Section 607.0509, Florida Statutes.

SIGNATURE *Gustavo Fernandez* Treasurer DATE **4/28/95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>S</b>
NAME	<b>FERNANDEZ, ANGEL F.</b>
STREET ADDRESS	<b>13483 SW 62 ST TH 1</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	<b>DP</b>
NAME	<b>FERNANDEZ, FRANCISCO</b>
STREET ADDRESS	<b>9480 SW 11TH ST.</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	<b>DV</b>
NAME	<b>DOMINGUEZ, ERNESTO</b>
STREET ADDRESS	<b>9474 SW 12TH ST</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	<b>T</b>
NAME	<b>FERNANDEZ, GUSTAVO M</b>
STREET ADDRESS	<b>6217 SW 128 PL</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), Florida Statute. 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 submit this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if correct, or in an attachment with an address.

SIGNATURE: *Gustavo Fernandez* DATE **4/28/95** 551-6111