## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L77019

(2)

HASSAN TIRES, CORP

Principal Place of Business Mailing Address						f 1881191; Sit 18811 barn bisie jan gin aratt Statt dint annt ann man mint ind.			
% CARLOS CA 7401 W FLAGL MIAMI FL 3314	ER ST	% CARLOS CANASI 7401 W FLAGLER ST MIAMI FL 33144-2401	401 W FLAGLER ST						
						3. Date incorporated or Qualified 05/29/1990	3a. Date 03/27		Report
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	•	Ap	oplied For
21		26			65-0197389 Not Applica			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc. 27			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & Stat	€	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	Country		8. This corporation has liability for			. 199.032,
24	25 29 30		30	ָ וֹכ		Florida Statutes	Yes 🐼	No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Re	gistered Ag	ent	
	IASI, CARLOS			81	Name				
7401 W FLAGLER ST MIAMI FL 33144				82	Street Addr	ess (P.O. Box Number is Not Acceptab	ile)		
				83					
				84	City			<b>85</b> Zip	Code
							FL.		
I office or r	to the provisions of Sections 607.0 registered agent, or both, in the Stum familiar with, and accept the ob-	ate of Florida. Such change v	was authorize	ed by	the corporat	oration submits this statement for the p ion's board of directors. I hereby accep	iurpose of ch of the appoir	nanging i ntment as	ts registered registered
SIGNATURE	Signature typed or printed name of registered	agent and tile if applicable	(NOTE: Registore	ed Ago	ot signature requir	red when reinstating)	păti		
12.						ADDITIONS/CHANGES TO OFFIC		_	
TITLE	DPT	DELETE	117	IILE			L	Change	Addition
NAME	CANASI, CARLOS 1.		1.2 N	1.2 NAME					
STREET ADDRESS	TREET ADDRESS 7401 W FLAGLER ST			1.3 STREET ADDRESS					
CITY-ST-ZIP	CITY-ST-ZIP MIAMI FL			1.4 CITY - \$1 - ZIP					
TITLE	<b> </b>	DELETE						Change	Addition

2.3 STREET ADDRESS

2 4 CiTY-ST-ZiP

3.4. CITY-ST-ZiP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - \$1 - ZIP

4.4 CITY - ST - ZIP

3 1 TITLE

3.2 NAME 3.3 STREET ADDRESS

4 1 TITLE

4.2 NAME

5 1 TITLE 5 2 NAME

61 TILLE

6.2 NAME

DCLETE

DELETE

DELETE

DELFTE

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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.

\_.\_.\_

NAME

TITLE

TITLE

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Marine and American American

4/20/97

(305) 261-3840

Change

Change

Change

Change

**FILED** 

May 07 1997 8:00am

Secretary of State

CR2E034 (9/96)

Addition

Addition

Addition

Addition