FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

SEP 1 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M13632** **(8)**

1. Corporate Name
LUCY'S TIRE, INC.

Principal Place of Business
7265 NW 44 ST.
MIAMI FL 33166

Mailing Address
7265 NW 44 ST.
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/04/1985
3a. Date of Last Report: 10/05/1994

2. Principal Place of Business
21 8225 N.W 80 st
Suite Apt. # 22
City & State
23 Miami, FL. 33166
24 25

2a. Mailing Address
26 8225 N.W 80th st
Suite Apt. # 27
City & State
28 Miami, FL 33166
29 30

4. FEI Number: 59-2549955 — 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. The corporation has subsidiaries or affiliates under Chapter 607 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
GARCIA, LUZ M.
1155 VENETIA AVENUE
CORAL GABLES FL 33134

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 Section 607.0505 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 hereby accept the obligations of Section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	RIOS, JOSE
STREET ADDRESS	1155 VENETIA AVE.
CITY, ST, ZIP	CORAL GABLES FL
TITLE	V
NAME	GARCIA, HERMINDO
STREET ADDRESS	1155 VENETIA AVE.
CITY, ST, ZIP	CORAL GABLES FL
TITLE	S
NAME	GARCIA, LUZ M.
STREET ADDRESS	1155 VENETIA AVE.
CITY, ST, ZIP	CORAL GABLES FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I hereby certify that the information contained herein, including any information contained in any attachments, is accurate and that I am properly authorized to file this report. I further certify that the corporation has paid all fees due to the Department of State for the preceding calendar year, that the corporation has filed with the Internal Revenue Service, Department of the Treasury, a federal income tax return for the preceding calendar year, and that the corporation has paid its taxes due under chapter 220, Florida Statutes, or has made arrangements satisfactory to the Department of Revenue for the payment of such taxes.

SIGNATURE: _____ JOSE RIOS 7/1/95 305 593-2028
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0183101 CP