

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Martin
Secretary of State
Division of Corporations

**APPROVED
AND
FILED**

25 MAY 23 AM 10:15

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # M57792

(7)

To Corporation Filer:

LOS GALLEGOS TIRE CORP.

Primary Place of Business	Mailing Address
2455 NW 21ST TERR MIAMI FL 33142	2455 NW 21ST TERR MIAMI FL 33142

(DO NOT WRITE IN THIS SPACE)

2. Principal Place of Business	2a. Mailing Address	3a. Date the corporation was organized	3b. Date of last Report
21	26	08/21/1987	04/21/1994
22. Suite, Apt. #, etc.	27. City & State	4. File Number	Applied For Not Applicable
		59-2818528	
23. City, State	28.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		6. Tax Exempt: Campaign Advertising Fund and Contributors	\$5.00 May Be Added to Fees
24.	25.	7. Has corporation liability for intangible tax under § 116.03/ Florida Statutes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MARTINEZ, ESTRELLA 2455 NW 21ST TERR MIAMI FL 33142	91. Name
	92. Street Address. If C/O, Box Numbers Not Acceptable
	93.
	94. City FL 95. Zip Code

11. Pursuant to the provisions of Sections 601, 602, and 603 of the Florida Statutes, the above named corporation submits the 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 not the attorney or legal counsel for the corporation.

Estrella Martinez

12. Primary Place of Business	13. Address of New Registered Agent	14. Change <input type="checkbox"/> Add <input checked="" type="checkbox"/>
PO MARTINEZ, ESTRELLA 2455 N.W. 21ST TERR MIAMI FL	14101 14th Ave. Miami, FL 33142	
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
14101 14th Ave. Miami, FL 33142	14101 14th Ave. Miami, FL 33142	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>

14. I declare, orally, that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 116.03 of the Florida Statutes. I further certify, that the information contained on this annual report or supplemental annual report is true and accurate and that my signature shall be the same legal officer as it appeared on the original document or that I am an officer or director of the corporation or the trustee or trustee representative to execute this report as required by Chapter 160 of the Florida Statutes, and that my name appears on Block 12 on the original or changed or certified copy with no additions.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10

Florida Statute

0163233

CP