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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M78440

BRANDON TIRE & AUTO SERVICE, INC.

Principal Place of Business Mailing Address						- 1 (48)00:) (i) (480) (0)() (ii) (0)() (ii) (0)()	III QIQII BIBII QIQII BI	IBUI BIBUI IBBI
2514 STATE RD. 60 E. 2514 STATE RD. 60 E.								
VALRICO FL 33594 VALRICO FL 33594		VALRICO FL 33594				DO NOT WRITE IN TH	IIS SDACE	
	•					3. Date Incorporated or Qualifed	113 SF AGE	
						04/22/1988		ļ
2. Principal PI	lace of Business	2a. Mailing Address				4. FEI Number	Apr	plied For
21		26				59 <sup>-</sup> 2888244	Not	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	
22		27					Fee Rec	<u></u>
City & State		City & State			سبديه وخره	6. Election Campaign Financing	\$5.00 i Added to	
23 Zin	Country	Zip	Coun	itrv	·	Trust Fund Contribution		D Fees
Zip	25	29 3	_	iii y		<ol> <li>This corporation owes the current year Personal Property Tax.</li> </ol>		□No
24	9 Name and Address of Curr		<u> </u>			10. Name and Address of New Register	ed Agent	
				81 N	lame			
	TY, JAMES P.		. }	82 S	Stroot Addro	ss (P.O. Box Number is Not Acceptable)		
	STATE RD. 60 E.		ľ		Meet Addre	SS (1.5. Sex Helitect is Not Asseptable)		
VALF	RICO FL 33594;		Γ	83		-		. 1
			-	84 0	City		85 Zip C	Code
					-		·L	
11. Pursuant	to the provisions of Sections our or	302 and 607. 1306, Florida Statutes	, uie au	OAGAII	anieu corpo	ration submits this statement for the purpose n's board of directors. I hereby accept the ap	pointment as rec	istered
agent. I a	egistered agent, or both, in the Star m familiar with, and accept the obli	le of Flonda. Such change was autigations of, Section 607.0505, Florid	horized la Statui	by the	corporador	ing board of directors, thoroby assist the ap	, , , , , , , , , , , , , , , , , , , ,	
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Florid	la Statu	by the tes.		when reinstating) DATE		
agent. I a	m familiar with, and accept the obli-	gations of, Section 607.0505, Florid	la Statu	by the tes.			AND DIRECTO	RS IN 12
agent. I a	m familiar with, and accept the obli-	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: R	egistered A	by the tes.		when reinstating) DATE		
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agent. I at SIGNATURE  12. TITLE	Signature, typed or printed name of registered a OFFICERS A PD SANTY, JAMES P. 2514 STATE RD. 60 E.	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: R AND DIRECTORS	egistered A  13.  1.1 TITL  1.2 NAM	by the tes.	nature required	when reinstating) DATE	AND DIRECTO	RS IN 12
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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 with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90036 042 \*\*\*150.00