

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M97655 (8)

1. Corporation Name

IAN'S TIRE & ROAD SERVICE INC.



Principal Place of Business

Mailing Address

1843 NW 38TH AVE.
FT. LAUDERDALE FL 33311
US

560 S.W. 38TH TERRACE
FT. LAUDERDALE FL 33312

3. Date Incorporated or Qualified

09/08/1988

3a. Date of Last Report

04/21/1995

4. FEI Number

65-0084253

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 1643 NW 38 Ave.

22 City & State

27 City & State

28 FT. LAUD. FLA.

23 Zip

Country

29 Zip

Country

30 33311

U.S.

9. Name and Address of Current Registered Agent

LAGRENADE, IAN
560 S.W. 38TH TERRACE
FT. LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name

IAN LA GRENADE

82 Street Address (P.O. Box Number is Not Acceptable)

4293 N.W. 55 Pl.

83

84 City

COCONUT CREEK

FL

85 Zip Code

33073

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPV
NAME LA GRENADE, IAN
STREET ADDRESS 560 SW 38TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ST
NAME LA GRENADE, IAN
STREET ADDRESS 560 SW 38TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
LA GRENADE, IAN
4293 N.W. 55 PL.
COCONUT CRK, FLA 33073

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IAN LA GRENADE

6-11-96 954 581-2290

CR2E034 (3/96)