

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000027987

1. Entity Name
M & M USED TIRES, INC.



Principal Place of Business
9203 E. COLONIAL DRIVE
ORLANDO, FL 32817

Mailing Address
9203 E. COLONIAL DRIVE
ORLANDO, FL 32817

FILED

04 JAN 23 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01142004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3679133

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALFONSO, LUIS
9203 E. COLONIAL DRIVE
ORLANDO, FL 32817

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME ALFONSO, LUIS
STREET ADDRESS 9203 E. COLONIAL DRIVE
CITY-ST-ZIP ORLANDO, FL 32817

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01/27/04--01001--014 **150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Luis Alfonso* President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/19/04
Date

Daytime Phone #