2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State
04-18-2003 90133 010 ***150.00

DOCUMENT # P02000003614

1. Entity Name
ROBERTO TIRE AND ROAD SERVICES, INC

Principal Place of Business	Mailing Address
3081 NW 13TH ST. MIAMI FL 33125	3081 NW 13TH ST. MIAMI FL 33125

2. Principal Place of Business	3. Mailing Address
3081 N.W. 13 St.	same
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: Miami Florida	City & State —
Zip: 33125 Country: U.S.A.	Zip — Country —

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 30-0016848 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MARTINEZ, MARIA A
3081 NW 13TH ST.
MIAMI FL 33125

7. Name and Address of New Registered Agent

Name: Maria A. Martinez
Street Address (P.O. Box Number is Not Acceptable): 3081 N.W. 13 St.
City: Miami **FL** Zip Code: 33125

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: Maria A. Martinez Maria A. Martinez 4-16-03
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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVTD MARTINEZ, MARIA A 3081 NW 13TH ST. MIAMI FL 33125	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: SIGNATURE REQUIRED Maria A. Martinez 4-16-03 305-633-8048
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)

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