

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P39518** (6)

1. Corporation Name
FRIEND TIRE COMPANY



Principal Place of Business: **11 INDUSTRIAL DRIVE MONETT MO 65708 US**
Mailing Address: **11 INDUSTRIAL DRIVE MONETT MO 65708 US**

3. Date Incorporated or Qualified: **07/06/1992**
3a. Date of Last Report: **04/24/1995**

2. Principal Place of Business: **21**
2a. Mailing Address: **26**

4. FEI Number: **43-1609347**
Applied For: Not Applicable

Suite, Apt. #, etc.: **22**
Suite, Apt. #, etc.: **27**

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

City & State: **23**
City & State: **28**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

Zip: **24** Country: **25**
Zip: **29** Country: **30**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

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 607.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ISELL, DONALD L.	
STREET ADDRESS	11 INDUSTRIAL DRIVE	
CITY-ST-ZIP	MONETT MO	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ANDERSON, MATTHEW J.	
STREET ADDRESS	3560 WEST MARKET STREET	
CITY-ST-ZIP	FAIRLAWN OH	
TITLE	T	<input type="checkbox"/> DELETE
NAME	KOJIMA, TATSUNARI	
STREET ADDRESS	601 SOUTH ACACIA AVENUE	
CITY-ST-ZIP	FULLERTON CA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	YAMAGATA, EIKA	
STREET ADDRESS	601 SOUTH ACACIA AVE	
CITY-ST-ZIP	FULLERTON CA	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SUZUKI, KOIN	
STREET ADDRESS	601 SOUTH ACACIA AVENUE	
CITY-ST-ZIP	FULLERTON CA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	DIRECTOR
53 STREET ADDRESS	ISAO MUCHAKU
54 CITY-ST-ZIP	601 SOUTH ACACIA AVENUE
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Matthew J. Anderson **Matthew J. Anderson**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/96 1-800-433-9851
Date Time Phone #

CR2E034 (12/95)