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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P92000000771 (5)

WINSTON'S TIRE SERVICE, INC.

## **FILED** Apr 22 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address					
2204 S. STAT			2204 S. STATE ROAD 7 MIRAMAR FL 33023					
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
						10/26/1992		
2. Principal Pl	ace of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number		Applied For
21		26				65-0369826		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27	27			5. Certificate of Status Desired	Fee	Required
City & State	)	City & State	City & State			6. Election Campaign Financing	\$5.0	O May Be
23		28				Trust Fund Contribution	Adde	d to Fees
Zip	Country Zip			Country		8. This corporation owes or has paid the cu	rrent year	Intangible
24	25	29	30				Yes	□ No
	9. Name and Address of Cu	rrent Registered Agent		1		10. Name and Address of New Registered	Agent	
	MASIR, WILTON			81	Name			
2204 S. STATE ROAD 7				82 Street Address (P.O. Box Number is Not Acceptable)				
MIF	RAMAR FL 33023					,		
	×			83				
					Oir.	· · · · · · · · · · · · · · · · · · ·	Tee 3:	- 6-3-
	-			84	City	FL	_ <b> 85</b>   Zi	p Code
11. Pursuant t	o the provisions of Sections 607.	.0502 and 607.1508, Florid	la Statutes, the a	above	e-named co	progration submits this statement for the purpose of	of changing	its registered
office or re	egistered agent, or both, in the S m familiar with, and accept the o	itale of Florida. Such chang bligations of Section 607.0	ge was authorize 1505 Florida Sta	ed by	the corpo	ration's board of directors. I hereby accept the ap	pointment a	as registered
ū	Treatmen with, agric accept the c	bligations or, occition bor s	5565, Florida Gic	aroto:	<b>.</b>			
SIGNATURE	Signature, typed or printed name of registere	o agent and lite if applicable	(NOTE Register	ed Age	ent signature re	quired when reinstating) DATE	<del></del>	
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12
TITLE	<b>P</b> D	☐ DE	LETE 1.1.1	ITLE			Change	Addition
NAME	RAMASIR, WILTON		1.2 }	IAME				
STREET ADDRESS	2204 S. STATE ROAD 7		1.3 5	TREET	ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33023		140	CITY-S	T-71P			
TITLE		D£.					Change	Addition
NAME			2.2 h	IAME				
STREET ADDRESS					ADORESS			
CITY-ST-ZIP					ST - ZIP			
TITLE		□ DE			31-211		Change	Addition
NAME		<b>—</b>		IAME			vvg.	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE	<del></del> -	□ DE			ST-ZIP		L Change	Addition
		الله الله		NAME	]		Vilarity:	, L. 700(10()
NAME OTDEST ADDOLES					1DDDC20			,
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		□ DE		ITY - S	1-ZIP		Chann	Addition
TITLE		17 pt					Change	Addition
NAME			5.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			ITY-S	1 - 7IP		T 7 2:	
TITLE		☐ DE					L Change	Addition
NAME				IAME	[			
STREET ADDRESS			6.3 S	TREET	ADDRESS			
CITY-ST-ZIP				ITY-S		<u> </u>		
14   hereby c	ertity that the information supplied	d with this films dose out a	qualify for the ev	amai	tion stated	in Section 119 07/3Vi) Florida Statutes I further o	artifu that t	ho information

Indicated on this annual report or supplied with this ning oces not quality for the exemption stated in Section 119,07(3)(), 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 eath; 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.

11200