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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P9200006991 (3)

MICHAEL TIRES CORP.

Principal Place of Business	Mailing Address	
701 SW 57 AVE MIAMI FL 33144	701 SW 57 AVE Miami FL 33144-3921	

FILED Jan 24 1997 8:00am Secretary of State



26 Suite, Apt #, etc Suite, Apt #, etc City & State City & State City & State City & State Country B. This corporation has liability for intengible tax under so Florida Statutes Florida		
2. Principal Place of Business 2a. Mailing Address 4. FEL Number 02/20/1998 Name 1/23/1992 26 5. Certificate of Status Depired S8.75 Fee R. Oity & State 5. Certificate of Status Depired S8.75 Fee R. Oity & State 5. Certificate of Status Depired S8.75 Fee R. Oity & State 5. Certificate of Status Depired S8.75 Fee R. Oity & State 6. Election Campaign Financing S6.70 Added 7. Trust Fund Contribution 7.		
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TO I SW 57 AVE MIAMI FL 33144 82 Street Address (P.O. Box Number is Not Acceptable) 83		
MIAMI FL 33144 83 64 City FL 85 Zip 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 to office or registered agent, or both, in this State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as agent. Tain familiar with, and accept the obligations of. Sections 607 0505, Florida Statutes SIGNATURE Signal in typerior of particular principle or registered aligned and first aligned in CNOTE. Registered Agent signature required when rematuring ONTE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS INTEL DAZ, NATIVIDAD E 2423 SW 102 AVE INTEL DAZ, NATIVIDAD E 2423 SW 102 AVE INTEL DAZ, PETER R 2423 SW 102 AVE INTEL DELETE 1.1 TITLE Change Change MIAMI FL DAZ, PETER R 2423 SW 102 AVE 32 SIRET ADDRESS CITY-SI-ZIP INTEL DELETE 3.1 TITLE Change Change Change Change Change Change AS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS INTEL Change		
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 office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment are agent, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE		
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 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 agent. Lam familiar with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE Significate, toped or justified remove in registering agent and this if applicable (NOTE, Registered Agent signature required when rematating) DATE		
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 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 agent. Lam familiar with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE Signature, byend or perhad turner of registered agent and tits diagraticable. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III.E NAME SIREET ADDRESS OTY-ST-ZIP TITLE S DAZ, PATTIVIDAD E 2423 SW 102 AVE MIAMI FL 13 STREET ADDRESS OTY-ST-ZIP TITLE DAZ, PETER R 2423 SW 102 AVE MIAMI FL DELETE 13 TITLE 1 Change NAME STREET ADDRESS OTY-ST-ZIP TITLE DELETE 31 TITLE 1 Change ANAME STREET ADDRESS OTY-ST-ZIP TITLE DELETE 31 TITLE 1 Change NAME STREET ADDRESS OTY-ST-ZIP TITLE DELETE 41 TITLE ANAME STREET ADDRESS OTY-ST-ZIP TITLE NAME STREET ADDRESS	Code	
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14. I do horeby 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 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 attachme if with an address.

SIGNATURE: L

SIGNATURE AND TYPED OR PRINTED

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