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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name	P92000012896	(0)
SANCHEZ TIRES INC).	

Principal Place of Business Mailing Address 440 14/507 00711 07 140 WEST SOTULOT



140 WEST 291H ST. HIALEAH FL 33010		HIALEAH FL 33010	•					
					3. Date Incorporated or Qualified 12/18/1992	3a. Date 6	of Last Rep 2/14/19	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		<u> </u>	pplied For
21		26			65-0375196			lot Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		City & State			6. Election Campaign Financing			May Be
23		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Count	У	8. This corporation has liability for it		under s	199.032,
24	25	29	30		Florida Statutes Yes 10. Name and Address of New R	□ No	cent	
	g. Name and Address of Curren	it Hegistered Agent	8	1 Name	10. Name and Address of New A	egistered A	gent	
	-		["	-				
	łez, candido		8	2 Street Add	ress (P.O. Box number is Not Acceptab	le)		
	EST 29TH ST.		8	4				
HIALEA	AH FL 33010		•		<u> </u>			
			8	4 City		FI	85 Zip	Code
		1 4 CO7 45 CO - 1 1 C+ 4	too the she :-	pamad cares	ration submits this statement for the sur			ensierea office
or registere familiar wit	ed agent, or both, in the State of Floridh, and accept the obligations of, Sect	da. Such change was authori, ion 607.0505, Florida Statute	zed by the col s.	poration's boa	ration submits this statement for the pur rd of directors. I hereby accept the appo	ointment as r	egistered	agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent	Land title if acclicable IN	QTE: Registered Ar	ent signature require	id when reinstating	DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1. 1 TITL	F	_)e	Addition
NAME	SANCHEZ, CANDIDO		1.2 NAM	£	_			
STREET ADDRESS	LAWN WAY 140		1.3 STRE	ET ADDRESS		_		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		1.4 CITY	-ST-ZIP		_		
TITLE	STD	☐ DELETE	2. 1 TITL	E	^		voge	Addition
NAME	SANCHEZ, LUISA R		2 2 NAM	E	• •			
STREET ADDRESS	LAWN WAY 140		23 STRE	ET ADORESS	•			
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NAME			4.2 NAM	É				
STREET ADDRESS			4.3 STR	EET ADDRESS				
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TIFLE		DELETE	5. 1 111	i		L	Change	☐ Addition
NAME			5 2 NAM	!				
STREET ADDRESS			5 3 STR	EET ADDRESS				
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TITLE		DELETE	6 1 TIT			Ĺ	Change	☐ Add₄tion
NAME			6.2 NAM	4E				
STREET ADDRESS			6.3 STR	EET ADDRESS				

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.

CANDIDO SANCHEL-PROSIDENT & Candido Sund 1/19/96 305-883-8245