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

FILED PROFIT Apr 02 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P9300000664 (1) DOCUMENT # MARACAY TIRE, INC. Principal Place of Business Mailing Address 2216 NW 28 STREET 2216 NW 28 STREET MIAMI FL 33127 MIAMI FL 33127 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/06/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0350436 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 26 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 30 Yes 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JAIMES, AMPARO 2215 NW 28 STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33127 83 84 City 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TETLE 1.1 TITLE Change Addition JAIMES, AMPARO NAME 1.2 NAME 10416 NW 32 PLACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33147 CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE TITLE VSD 21 TITLE Change Addition MARTINEZ, JOSE NAME 22 NAME 10416 NW 32 PLACE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33147** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-S1-ZIP DELETE TITLE Change 41 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIE 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 attactment with an address. 2116198

CITY-ST-ZIP

6.4 CITY - ST - ZIP