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

DOCUMENT # P9300034836 (5) BUDGET TIRE & BRAKE, INC.						E.I.I. 28 161 28 182 May \$1000	. 18188 SIILE SIII ISS
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oal Place of Bu	usiness	Mailing Address			E INDIANTON AND INCIDENTALING MARKET	9141 4 9 111 4 3 3 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	. 1919Q 0}20 BIII 19 Q l
1002 S 8TH STREET FERNANDINA BEACH FL 32034		1002 S 8TH STREET FERNANDINA BEACH FL 32034					
					3. Date Incorporated or Qualified	3a. Date of Last	
					05/10/1993	04/18/	Y
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For Not Applicable	
1		Suito Aol # obo		59-3181055	\$8.75 Additional		
ite, Apt. #, etc		Suite Apt #, etc.			5. Cert-ficate of Status Desired	1 1 7	e Required
y & State		City & State		Election Campaign Financing \$5.00 May 8		00 May Be	
., o clare		28			Trust Fund Contribution		led to Fees
)	Country	Zιρ	Country	,	8. This corporation has liability for		s 199.032,
	25	29	30		Florida Statutes Yes 10. Name and Address of New I	No	
9.	Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New I	Jegistereo Agent	
						1-1-1	
	NIEL S ATTY		82 Street		ress (P.O. Box Number is Not Accepta	uie)	
13 1/2 N 4TH STREET FERNANDIA BEACH FL 32034			83				
PERMANU	MA BEAUTI FL 32034		0.4			85	Zip Code
			84	1	ration submits this statement for the pu	FL	•
ATURF	nd accept the obligations of, Section to be for pentantians of registered agrice OFFICERS ANS	and the discussion of the			ration submits this statement for the purif of directors. Thereby accept the application is statement to the purificulty of directors. Thereby accept the applications accept the application of the purificulty of the purifical of the purificulty of the purificu	DATE FICERS AND DIREC	TORS IN 12
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	FRAZIER, JOHN W III		1.2 NAME	É	RAGIER, JOHN WITH 58 MissiuNTRAG 57 MARYS, GA. 315:	(a \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
1 ADDRESS	958 MISSION TRACE DR			FADDRESS 9	158 77/155/6N 1 KHC	E D15 27	
ST-ZIP	ST MARYS GA 31558	Floriti	14 CITY -	S1 - ZIP	ST. MIARYS, G-14. 3102	O &	ne [] Addition
	\$	□ DELLETE	2 1 THTLE 2 2 NAME				
	FRAZIER, YVONNE E			I ADDRESS			
FADDRESS	958 MISSION TRACE DR		2.4 CITY -	Į.			
ST-ZIP	ST MARYS GA	₩ DELETE	3 1 HTLE			Chang	e Addition
	VP Keffer, Greg	-	3.2 NAME				
7 ADDRESS	3163 ELLIOTTS BLUFF RD	/ STE - 17	33 STRE	ET ADDRESS			
SI-ZIP	ST MARYS GA		3.4 Cilly	ST ZIF			
		☐ DEL€TE	4 1 111LE	1		Chang	ge Addition
			4.2 NAME				
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			6.2 NAM	Ε			
ET ADDRESS			63 SIRE	ET ADORESS			
-S1-7IP			€ 4 CHY			0.07043 51:14:01	akitan 18. aka
I do hereby ce	ertify that the information supplied information indicated on this appropriate	with this filing is votuntarily fur	mished and da nual report is t	es not qualify true and accu	r for the exemption stated in Section 11 trate and that my signature shall have th	ક.u7(૩)(κ), Florida St ne same legal effect ક	atutes. Hurtner as if made un <mark>de</mark> r
-S1-7IP	ertry that the information supplied e information indicated on this arm man officer or director of the cony ook 12 or Block 13 if of anged, o	with this filing is votintariy for by eport or supplemental an out on or the presidence or trust on an attachment with an add	6 4 Cily	- SI - 2 P	r for the exemption stated in Section 11 nate and that my signature shall have this report as required by Chapter 607.	9.07(3)(k), Florida St ne same legal effect Florida Statutes; and	atu as i th

SIGNATURE:

THE SAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

bhntrazieril 44/96 904-277-8765