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

Mailing Address

4206 FOWLER ST

FORT MYERS FL 33901

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

4206 FOWLER ST

FORT MYERS FL 33901

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DIVISION OF 1 DOCUMENT # P93000078530 (1)

SUPERIOR TIRE COMPANY, INC.

FILED
Apr 30 1998 8:00am
Secretary of State

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4-22-98 941-939-2161
Date Dayline Phone 1 0421287

US		US					DO NOT WHITE IN THIS SPACE				
								3. Date Incorporated or Qualified			
						<u> </u>					
2. Principal P	Principal Place of Business			2a. Mailing Address				4. FEI Number	A	pplied For	
21			26				65-0446522	N	ot Applicable		
Suite, Apt. #. etc			Suite, Apf. #, etc.				l <u> </u>		Additional		
22			27]				5. Certificate of Status Desired		equired		
City & State			City & State					a finaling Committee Singuistra			
´	·	t · - 3				6. Election Campaign Financing Trust Fund Contribution		May Be			
23	Zip Country			28						to Fees	
	1 − 1				\neg	Country		8. This corporation owes or has paid the curi	_ ´ -	'	
25 29 30 9 Name and Address of Current Registered Agent					0]	<u> </u>		· · · · · · · · · · · · · · · · · · ·		_] No	
	g, Name and Addre	ss of Current P	Registered Agent			10. Name and Address of New Registered Agent					
Messier, Michael						81 Name					
4206 FOWLER ST					92	82 Street Address (P.O. Box Number is Not Acceptable)					
FORT MYERS FL 33901					02	Sitest Address (F.O. DOX NUMBERS NOt ACCEPTABLE)					
FURI MYERS PL 33901											
										ļ	
					84	City			85 Zip	Code	
								FL			
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 holh, 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, typics or profed name		atti a a si atti		On anythere of American			when reinstating) DA1L			
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12.		THOUNS MALL	and the second second second second	ELETE	13.	т		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition	
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CITY-SI-ZIP						T-21P				ì	
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NAME	RASNAKE, FRED				2.2 NAME	}			•	-·	
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CITY - ST - ZIP	FT. MYERS FL				2 4 CHY-5	1-ZIP		- Per			
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NAME)				·	62 NAME]]	
STREET ADDRESS					6.3 STREET	address				}	
CITY-ST-ZIP					64 CITY-ST						
	ertify that the information	n supplied with I	this filing does not	qualify for t			d in Se	ection 119.07(3)(i), Florida Statutes. I further cer	tify that the	information	
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 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 received or trustate empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed, or or gryatlachytent with an address.											