

4-18-95 B- C
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
 ANNUAL REPORT
 1995



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

**APPROVED
 AND
 FILED**

95 MAY -1 AM 10:05

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P94000075439 (7)**

1. Corporation Name:
AIRPORT TIRE COMPANY INCORPORATED

APPROVED

Principal Office Address: **5721 NW 74 AVE TAMARAC FL 33321**
 Mailing Address: **5721 NW 74 AVE TAMARAC FL 33321**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: **10/10/1994**
 3a. Date of Last Report
 4. FEI Number: **65-0526156**
 Applied For (Not Applicable)
 5. Certificate of Status Desired \$6.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under § 199.032, Florida Statutes Yes No

2. Principal Place of Business
 21 **3951 SW 83 Terr**
 Suite, Apt. #, etc.
 22
 2a. Mailing Address
 26 **3951 SW 83 Terr**
 Suite, Apt. #, etc.
 27
 City & State: **Davie FL 33328**
 23
 City & State: **Davie FL**
 28
 Zip: **33328** Country: **Broward**
 24
 Zip: **33328** Country: **Broward**
 29

9. Name and Address of Current Registered Agent
**WASHECKA, EDWARD A
 5721 NW 74 AVE
 TAMARAC FL 33321**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 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 607.0508, Florida Statutes.

SIGNATURE: *Edward Washecka* DATE: **5/31/95**

12. OFFICERS AND DIRECTORS

11. TITLE	D
12. NAME	WASHECKA, EDWARD A
13. STREET ADDRESS	5721 NW 74 AVE
14. CITY, ST, ZIP	TAMARAC FL 33321
15. TITLE	D
16. NAME	WASHECKA, EDWARD A
17. STREET ADDRESS	5721 NW 74 AVE
18. CITY, ST, ZIP	TAMARAC FL 33321
19. TITLE	
20. NAME	
21. STREET ADDRESS	
22. CITY, ST, ZIP	
23. TITLE	
24. NAME	
25. STREET ADDRESS	
26. CITY, ST, ZIP	
27. TITLE	
28. NAME	
29. STREET ADDRESS	
30. CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

31. TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	Rittberger, Gregory T	
33. STREET ADDRESS	3951 SW 83 Terr	
34. CITY, ST, ZIP	Davie FL 33328	
35. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
36. NAME		
37. STREET ADDRESS		
38. CITY, ST, ZIP		
39. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
40. NAME		
41. STREET ADDRESS		
42. CITY, ST, ZIP		
43. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
44. NAME		
45. STREET ADDRESS		
46. CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 140.02(9)(b), Florida Statutes. I further certify that the information included 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or in an attachment with an address.

SIGNATURE: *Greg Rittberger*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR