1-20.98 B-0262 C-FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P94000078505 (2)

TIRE EQUIPMENT SALES & SERVICE COMPANY, INC.

Principal Place of Business	Mailing Address
1696 OLD OKEECHOBEE RD., UNIT 2-1	1696 OLD OKEECHOBEE RD., UNIT 24
WEST PALM BEACH FL 33409	WEST PALM BEACH FL 33409

FILED Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/24/1994 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0529926 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Žφ Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes □ No 29 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CLEMENT, ROXANNE 1696 OLD OKEECHOBEE RD., UNIT 2-1 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33409 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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 diapplicable (NOTE: Rog stored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELLIE TITLE 1.1 1/11.5 Change Addition CLEMENT, ROXANNE NAME 1.2 NAME 11446 54TH STREET NORTH STREET ADDRESS 1.3 STREET ADDRESS ROYAL PALM BEACH FL 1.4 DITY-ST-ZIP CITY-ST-ZIF DELETÉ Change Addition TITLE 2.1 TITLE CRAIG, CLEMENT NAME 2.2 NAME 11446 54TH STREET NORTH STREET ADDRESS 2.3 STREET ADDRESS **ROYAL PALM BEACH FL** CITY-ST-ZIP 2 4 CITY - S1 - ZIP DELETE Change Addition 3.1 THUE NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-\$1-7IP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 HILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5,4 City - St - ZiP DELFTE Channe ___ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I hereby 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 suppliemental 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 attackment with an address.

SIGNATURE:

1/7/98