SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000047620 (6)

GARCIA TIRE, INC.

FILED
Sep 18 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address							- I TARTERS THE FRIEND OTHER DESIGN BRING				
10190 W FLAGLER ST 10190 W FLAGLER ST											
MIAMI FL 331		MIAMI FL 33174									
US		US				DO NOT WRITE IN THIS SPACE					
						3	Date Incorporated or Qualified 3a. Date of Last Report				
							06/19/1995	03/	27/199) 6	
	lace of Business	2a. Mailing Address				4	4. FEI Number			Applied For	
21		26				65-0608984		\bot	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5	5. Certificate of Status Desired			5 Additional	
22 City 8 Ctal		[27]								Required	
City & State	9	City & State				6	6. Election Campaign Financing \$5.00 May Be				
Zip	Country	28 Zip	Zip Cou				Trust Fund Contribution	<u> </u>		ed to Fees	
24]	├ ── ┐ '			Jintry	f	8	3. This corporation owes or has pa			_	
24]	25 Name and Address of Curren	29 Agent	30	т			Personal Property Tax due June		Yes	∐ No	
GARCIA, BLANKY					Nam		10. Name and Address of New Registered Agent				
	45 SW 139 CT		81 Name								
			82 Street			et Address ((P.O. Box Number is Not Acceptab	le)			
MIA	.MI FL 33186										
				83							
				84	City				85 Zi	ip Code	
					<u> </u>			<u>FL</u>	1 1 1		
11. Pursuant t	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Stat of Florida. Such change wa	utes, the al	bove d by	e-name	ed corporation's	ion submits this statement for the p	urpose of	changing	g its registered	
agent. I ai	m familiar with, and accept the obliga	tions of Section 607.0505,	Florida Sta	tutes	S.	5 po ation 0	board of an objects. Thereby accept	t inc appo	interiorit e	as registered	
SIGNATURE											
					ent signat	ure required whe		DATE			
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFIC				
TITLE	P DELETE GARCIA, RENE D			1.1 TITLE					Change	e Addition	
NAME			1.2 N	AME		1					
STREET ADDRESS	11045 S.W. 139TH COURT			1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL 33186		1.4 CI	1.4 CITY-ST-ZIP							
TITLE	ST CARDON PLANTS	☐ DELETE			LE			1	Change	e L Addition	
NAME	GARCIA, BLANKY		2.2 N		2.2 NAME						
STREET ADDRESS	11045 S.W. 139TH COURT		2.3 \$		2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33188		2.40	2. 4 CITY-ST-ZIP							
TITLE		DELETE 3.1 TO							Change	e Addition	
NAME			3.2 N	AME						İ	
STREET ADDRESS			3.3 S1	TREE 1	ADDRESS	8					
CITY-ST-ZIP			3.4. C	ITY-S	ST-ZIP						
TITLE		☐ DELETE	DELETE 4.1 TI						Change	e 🔲 Addition	
NAME			4. 2 N	AME							
STREET ADDRESS			4.3 ST	REET	ADDRESS	3					
CITY-ST-ZIP			4.4 CI	TY-S	iT-ZIP						
TITLE				51 TITLE					Change	e Addition	
NAME			5.2 N/	AME		-					
STREET ADDRESS			5 3 S1	REET	ADDRESS	3					
CITY-ST-ZIP			5.4 CI			1					
TITLE		DELETE	6.1 70			1			Change	e Addition	
NAME			6.2 N/			1		•			
STREET ADDRESS					ADDRESS	; [
CITY-ST-ZIP			6.4 CI			´					
	y certify that the information upplied	with this filing does not	alify or the	exe	mption	stated in Se	ection 119.07(3)(i), Florida Statutes	. I further	certify the	at the	

information indicated on this annual report of supplemental annual report is due 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 contract or the recover or truster employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 it chapted, or on an attachment with an address.