

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mörfham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUL 14 AM 10:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000060714 (9)

1. Corporation Name
PROFESSIONAL TIRE SERVICE, INC.



Principal Place of Business
1245 EAST AVENUE NORTH
SARASOTA FL 34237

Mailing Address
1245 EAST AVENUE NORTH
SARASOTA FL 34237

3. Date Incorporated or Qualified
08/07/1995

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 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 s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRETTO, ELIAS A
1245 EAST AVENUE NORTH
SARASOTA FL 34237

81 Name

PEREZ, ARNOLDO S.

82

Street Address (P.O. Box Number is Not Acceptable)

1245 EAST AVE. N.

83

84

City

SARASOTA, FL 34237

FL

85 Zip Code

34237

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

7-7-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PS	PRETTO, ELIAS	1245 EAST AVENUE NORTH	SARASOTA FL 34237	☒
VT	PEREZ, ARNOLDO S	1245 EAST AVENUE NORTH	SARASOTA FL 34237	☐
				☐
				☐
				☐
				☐
				☐

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	☒	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	☐	☒
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	☐	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	☐	☐

14. I do 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 attachment with an address.

SIGNATURE: *[Signature]* PRESIDENT
ARNOLDO PEREZ 4-29-97 (941) 366-8574

CR2E034 (9/96)