

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

FILED
Jul 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

**MASTER MECHANICS TIRE AND AUTO SERVICE
CENTER, INC.**

Principal Place of Business

Mailing Address

**901 W. Brandon Blvd.
Brandon, FL 33511**

**901 W. Brandon Blvd.
Brandon, FL 33511**

21 2. Principal Place of Business 123 N. Miller Road Suite, Apt. #, etc. 22 City & State Valrico, FL Zip 33594	26 2a. Mailing Address 123 N. Miller Road Suite, Apt. #, etc. 27 City & State Valrico, FL Zip 33594
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3. Date Incorporated or Qualified 10/18/95	3a. Date of Last Report 6/13/96
4. FEI Number 59-3221148	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

Charlotte Mutascio
901 W. Brandon Boulevard
Brandon, FL 33511

10. Name and Address of New Registered Agent

81 Name Charlotte Mutascio
82 Street Address (P.O. Box Number is Not Acceptable) 123 N. Miller Road
83
84 City Valrico
85 Zip Code FL 33594

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

Charlotte Mutascio

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P, D	☐ DELETE	1.1 TITLE P, D	☒ Change ☐ Addition
NAME Charlotte Mutascio		1.2 NAME Charlotte Mutascio	
STREET ADDRESS 901 W. Brandon Boulevard		1.3 STREET ADDRESS 123 N. Miller Road	
CITY-ST-ZIP Brandon, FL 33511		1.4 CITY-ST-ZIP Valrico, FL 33594	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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; 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 attachment with an address.

SIGNATURE:

Charlotte Mutascio

Signature typed or printed name of signing officer or director

Charlotte Mutascio, Pres.

(813) 661-1100

CR2E034 (9/96)