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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

A PROPERTOR FOR TAXABLE PROPERTOR AND A PROPER

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600008793 (7)

D & M TIRES & SMALL ENGINES, INC.

Principal Place of Business Mailing Address						I HORAIDOS DÃO LOTIA BITLE ÓDEIT OBJITE O			16 (11) (91)
4819 CAPITAL CIRCLE SW TALLAHASSEE FL 32310			4819 CAPITAL CIRCLE SW TALLAHASSEE FL 32310-7558						
						3. Date Incorporated or Qualified 01/29/1996	3a. Dat	e of Last R	eport
2. Principal Pi	ace of Business	2a. Mailing A	26. Mailing Address			4. FLI Number		Ap	oplied For
21		26	van van			59-33673/9 Not Applicable			ot Applicable
Suite, Apt.		27				5. Certificate of Status Desired		\$8.75 A	
City & State	e	City & Sta	City & State			6. Election Campaign Financing	_	\$5.00	May Be
23		28	_ \$ ******			Trust Fund Contribution		Added t	to Fees
Zip	ip Country		Zip Country		•	8. This corporation has liability for intangible tax under s. 199.032,			. 199.032,
24	25 29			30		Florida Statutes			
9. Name and Address of Current Registered Agent					I-:	10. Name and Address of New F	egistered A	gent	
RE#	ASON, MICHAEL T			81	Name				
4819 CAPITAL CIRCLE SW				82	Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32310									
				83					
ì				84	City			85 Zip (Code
				1	·		FL		
11. Pursuant office or reagent. I a	to the provisions of Sections 607. ogistered agent, or both, in the S m familiar with, and accept the ol	0502 and 607.1508, fi tate of Florida. Such c bligations of, Section 6	lorida Statutes hange was aut 607.0505, Florid	, the above horized by da Statule	e-named corp the corporat s.	poration submits this statement for the tion's board of directors. I hereby acc	purpose of e ept the appo	changing it intment as	s registered registered
SIGNATURE						•			
	Signature, typed or printed hanic of registered		(NOTE F		et signature requi	red whomre installing)	DATE		
12.		AND DIRECTORS	T 1677 FEE	13.		ADDITIONS/CHANGES TO OFF			
TIFLE	PSTD	L	J. DELETE	1.1 THLE		•	į,	☐ Change	Addition
NAME	REASON, MICHAEL T			1.2 NAME					
STREET ADDRESS	913 CASEY DRIVE			1.3 STREET	ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32310		T-1	1.4 CHY - 5	1-7(P			—	
TITLE		L.] DELETE	2.1 THILE			l	L Change	☐ Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 \$1REE1	ADDRESS				
CITY-ST-ZIP			1 50 7 10	2. 4 CITY -	\$1-7IP			- AL-	1 7 2 200
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NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	ı				
CITY-ST-ZIP			1 pricts	3.4. City-	ST - ZIP		······································	Chance	Addition
TITLE		L.] DELETE	4 1 11111			1	Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STHEE					
CITY-ST-ZiP			1 nc (1)t	4.4 CHY-5	ST-7/P			Chanas	Addisc
TITLE		L.] DELETE	5.1 TALE			i	Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET					
CITY-ST-ZIP			Toucie	5.4 CITY - 5	ST-21P			Character Character	T Addies.
TITLE		L.	DLLETE	6.1 TITLE			1	Change	Addition
NAME				6.2 NAME					
STREET ADDRESS	Part of the second			6.3 STREE	ADDRESS				

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 indigated on this annual report or supplemental annual report is frue 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.