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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000051167 (0)

HAITIAN TIRE, INC.

Principal Place of Business

Mailing Address

FILED Jun 09 1997 8:00am Secretary of State



PEMBROKE PA	ale Beach Blvd IRK FL 33023	3680 HALLANDALE BEACI PEMBROKE PARK FL 330.						
					3. Date Incorporated or Qualified 06/14/1996	3a. Date of Las	st Report	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21	<u>.</u> .	26			65-0679868		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	├ ─┐		5. Certificate of Status Desired	, , ,	\$8.75 Additional Fee Required	
City & Stat	ө	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
23 Zip 24	Country 25	Z(p 29	30	ntry		Yes 🗌 No	or s. 199.032,	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Reg	gistered Agent		
	RCHE, DAVID			81 Name				
3880 HALLANDALE BEACH BLVD PEMBROKE PARK FL 33023				Į.	Address (P.O. Box Number is Not Acceptable)			
	•		[83				
***				84 City			ip Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.6 registered agent, or both, in the Standard with, and accept the ob-	0502 and 607.1508, Florida Statu ate of Florida, Such change was bligations of, Section 607.0505, Fl	tes, the at authorized orida Stati	ove-named cor I by the corpora utes.	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changin It the appointment	g its registered as registered	
<u> </u>	Signature, typed or printed name of registered		H : Registered	Agent signature requ	ired when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D CADICH DAVID	☐ DELETE	11111	- 1		☐ Chang	ge 🔲 Addition	
NAME	GARICH, DAVID 3680 HALLANDALE BEACH	OI VID	12 NA	1				
STREET ADDRESS	PEMBROKE PARK FL 33023			REET ADDRESS				
CITY-ST-ZIP	PEMPHONE PARK I'L 00020			Y-S1-ZIP		Chan		
TITLE		☐ DELETE	2.1 TIT	l l		L Chang	ge L. Addition	
NAME			27 NA					
STREET ADDRESS				REET ADDRESS				
¿CITY-ST-ZIP TITLE		DELETE	2. 4 CI 3.1 1 II	1Y-\$1-7IP		[] Chang	e Addition	
NAME		L. DELL'IE	3.1 III 3.2 NA	l	·	L. GIRIN	ge [] Addition	
STREET ADDRESS				RELT ADDRESS				
CITY-ST-ZIP	·			·	,			
-TITLE		□ DELETE	4.1 111	TY-\$1-ZIP		Chang	e Addition	
NAME			4. 2 N/				yo	
STREET ADDRESS				REE1 ADDRESS				
City-St-ZIP				Y-ST-ZIP				
TITLE		DELETE	5.1 111			Chang	ge 🔲 Addition	
NAME		boar Colors	5.2 NA			Chang	, , , , , , , , , , , , , , , , , , , ,	
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		DELETE	61 III			Chang	e Addition	
NAME			62 NA	į	·	C. Chang	,- e 1100111011	
STREET ADDRESS			1	REET ADDRESS				
CITY-ST-ZIP				Y-S1-7IP				
UII 1 - 51 - 2#			0.4 UII	1-91-715				

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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name