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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CHY-SI ZE

appears in Block 12 of Block 13



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

803-869-0910

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000070320

TYRE BENEFIT & INVESTMENT SERVICES, INC.

4711 W WATERS-AVENUE 4711 W WATERS AVENUE APT. 12081 APT. 1208-**TAMPA FL 33614** TAMPA FL 33614-1472 3. Date Incorporated or Qualified 3a. Date of Last Report 08/16/1996 2a. Mailing Address 4. FEI Number Applied For SHELDONA 8102 59-340 N. SHECDOW Not Applicable \$8.75 Additional 5. Certificate of Status Desired (008 Fee Required City & State \$5.00 May Be 8. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 9. Name and Address of Current Registered Agent 30 HICGBOROUS Florida Statutes Ø2 Yes □ No 10. Name and Address of New Registered Agent 81 Name TYRE, D. CRAIG 4711 W WATERS AVENUE 82 APT. 1208 83 **TAMPA FL 33814** 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 bouldar will, and accept the obligations of, Section 607.0505, Florida Statutes. -8 SIGNATURE Registered A 12. OFFICERS AND DIRECTO ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)HILE DELETE 1.1 TITLE CRAIC Change TYRE, CRAIG D NAM-1.2 NAME N. SHELDON Rd. #1008 4711 W-WATERS AVE, APT 1208 STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33614 COTY - ST - ZIP 1.4 CITY-ST-ZIP 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - S1 - ZIF 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 DELETE 111, 6 4.5 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 00Y-S1-7/P 4.4 CITY-ST-ZIP DELETE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 011Y-\$1-76 5.4 City-St-ZiP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. Ido 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

an attachment with an address.

changed, or of