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

PROFIT
CORPORATION
ANNUAL REPORT
1997

「金のできますが、100mのであれている。 あんでき まんてき 動物などを含まるとなった。 かった おおものできません。 それできながらなってもないのであれる。 できないのであり、 100mのできない



FLORIDA DEPARTMENT OF STATE

FILED

Apr 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078710 (6)

PERFORMANCE WHEELS, INC.

B to Lot B		14.00		
Principal Place of Business Mailing Address				
SO1 NW S RIVER DRIVE MIAMI FL 33136		501 NW S RIVER DRIVE MIAMI FL 33136		
				3. Date Incorporated or Qualified 3a. Date of Last Report 09/23/1996
	Place of Business	2a. Mailing Address		4. FEI Number Applied For Not Applicable
Suite, Apt	L# ota	26		
22 City & Sta		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required
	ne.	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	Trust Fund Contribution LJ Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,
24	25]	29	30	Florida Statutes Yes No
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
SALVADOR, JAVIER 81 Nat			81 Name	В
501 NW S RIVER DRIVE			82 Street	t Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33136				
			83	· · · · · · · · · · · · · · · · · · ·
			84 City	FL 85 Zip Code
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 agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I horeby accept the appointment as regist				
agent. (am familiar with, and accept the obliga	tions of, Section 607.0505, FI	orida Statutes.	,
SIGNATURE	Control	The state of the s		
12.	Signature, typed or printed name of registered agen OFFICERS AND		It.: Registered Agent signatur 13.	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	Change Addition
NAME	SALVADOR, JAVIER		1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33136		1.4 CiTY - ST - ZiP	
TITLE	SD	DELETE	2 1 TITLE	Change Addition
NAME	SALVADOR, GLADYMEL MRS		22 NAME	
STREET ADDRESS	***************************************		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33136		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 TITLE	 	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME		C OCCUIT	4.1 TITLE 4. 2 NAME	L Change L Adonton
STREET ADDRESS	1		4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME	l"		5.2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	. [
CITY-ST-ZIP			54 CITY-ST-ZIP	
THLE		DELETE	61 TITLE	Change Addition
NAME	1		6.2 NAME	}
STREET ADDRESS	·		6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14. I do here Informati	by certify that the information supplied on indicated on this annual report or at	with this filing does not quali applement annual report is i	fy for the exemption t true and accurate and	stated in Section 119.07(3)(i). Florida Statutes. I further certify that the id that my signature shall have the same legal effect as if made under oath; that
l am an d appears	officer or director of the corporation or I in Block 12 or Block 13 if changed, or	he regelver at thistee en pow on art attachment with an ad-	vered to execute this dress.	d that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 607, Florida Statutes; and that my name