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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000088541 (3)

SPECIALTY TIRES OF FLORIDA INC.

Principal Place of Business Mailing Address						- T 18 DI I DUL EIN 1811 DE DIIII ENLII DOISS DOIII AUGUS SUSUI INIUS ULLIE UJUUL IINII SU	il i		
3083 SEAGATE CIR MERRITT ISLAND FL 32953			3083 SEAGATE CIR MERRITT ISLAND FL 32953			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1997			
2. Principal Place of Business			2a. Mailing Address			4. FEI Number Applied F	or		
21		26			59-3408459 Not Applie	cable			
22	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired Serviced Fee Required			
23	City & State	City & State	· '		6. Election Campaign Financing \$5.00 May But Trust Fund Contribution Added to Fees				
24	Zip	Country 25	Zip 29	Countr 30	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
	9. Name	and Address of Current I	Registered Agent	10. Name and Address of New Registered Agent					
LEHMANN, ROY G 3083 SEAGATE CIR MERRITT ISLAND FL 32953					Name Street Addr	ress (P.O. Box Number is Not Acceptable)			
				84		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 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.									
SI	SIGNATURE								

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											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	DV	☐ DELETE	1.1 TITLE	Change Addition							
NAME	Lehmann, Roy G		1.2 NAME								
STREET ADDFESS	3083 SEAGATE CIR		1.3 STREET ADDRESS								
CITY-ST-ZIP	MERRITT ISLAND FL 32953		1.4 CITY - ST - ZIP								
TITLE	DST	DELETE	2.1 TITLE	Change Addition							
NAME	LEHMANN, MARGARET J		2.2 NAME								
STREET ADDRESS	3083 SEAGATE CIR		2.3 STREET ADDRESS								
CITY - ST - ZIP	MERRITT ISLAND FL 32953		2.4 CITY-ST-ZIP								
TMLE	Ρ	☐ DELETE	3.1 TITLE	Change Addition							
NAME	YOUSE, PATRICIA J		3.2 NAME	·							
STREET ADDRESS	3083 SEAGATE CIR		3.3 STREET ADDRESS								
CITY-ST-ZIP	MERRITT ISLAND FL 32953		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								
C1TV-ST-71P			64 CITY-ST-7/P								

14. I hereby certily 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:

FILED

Feb 06 1998 8:00am

Secretary of State