SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Jul 22, 1999 8:00 am Secretary of State

07-22-1999 90002 030 ***150.00

DOCUMENT # P97000010315

KENWIN'	S TIRE CENTER, INC.				
- 1 Plan	- FD	Bá-lita - Addana			
Principal Place		Mailing Address	_		
11509 N.W. 27TH AVENUE 11509 N.W. 27TH AVENUE MIAMI FL 33167 MIAMI FL 33167					
US WHAMI FE 33107				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
					01/29/1997
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
21		26			APPLIED FOR 59-30/03/8 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
27		27			Fee Required
City & State		⊢ ¬ '	City & State		6. Election Campaign Financing \$5.00 May Be
23		28	- -		Trust Fund Contribution
Ζiρ	Country	Zip	\vdash	intry	8. This corporation owes the current year intancible Personal Property.
24	25	29	30		
	9. Name and Address of Currer	it Registered Agent		81 Name	10. Name and Address of New Registered Agent
SEE	PERSAD, KEVIN			VI Hallie	
	9 NW 27TH AVENUE			82 Street Ad	dress (P.O. Box Number is Not Acceptable)
MIAMI FL 33167				90	
IAITURA	11 1 2 35 107			83	
				84 City	85 Zip Code
·				<u> </u>	poration submits this statement for the purpose of changing its registered
office or r agent, I a SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age	e of Florida. Such change was pations of, section 607.0505, Fi	authorize Iorida Stat	d by the corpora	ation's board of directors. I hereby accept the appointment as registered
12.		ND DIRECTORS	13.	red Agent agnature in	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1,1 TI	TLE	Change Addition
NAME	SEEPERSAD, KEVIN	☐ DECE IE	1.2 NA		
STREET ADDRESS	11509 NW 27TH AVENUE		1.3 ST	REET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33167		- 1	TY-ST-ZIP	
TITLE	110 011 1 1 0 0 101	DELETE	2.1 TI		Change Addition
NAME			2.2 N/	ME	
STREET ADDRESS		·	~~	REET ADDRESS	•
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		DELETE	3.1 TI		Change Addition
NAME			3.2 N/	ME	
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		DELETE	4.1 TI		Change Addition
NAME		() DWEC16	4.2 N		- Andright
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		DELETE	5.1 TI		Change Addition
NAME		Land Description	5.2 N		The state of the s
STREET ADDRESS			5.3 ST	REET ADDRESS	
CITY-ST-ZIP				TY-ST-Z i P	
TITLE		DELETE	6.1 TI		Change Addition
NAME		F-1 044615	6.2 N/		
STREET ADDRESS			- 1	REET ADDRESS	
				TY-ST-ZIP	
14. I hereby ce	rtify that the information supplied with	this filing does not qualify for			ection 119.07(3)(i), Florida Statutes. I further certify that the information
indicated o an officer of	n this annual report or supplemental	annual report is true and accu sceiver or trustee empowered t	urate and	that my signatu	re shall have the same legal effect as if made under oath; that I am required by Chapter 607, Florida Statutes; and that my name appears

G OFFICER OR DIRECTOR

Date

Daytime Phone #

P97000010315 593274-90002-3 TO WHOM IT MAY CONCERN.