## FILE NOW: FILING FEE AFTER MAY 1ST IS \$5

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT FSTATE

Sandra B. Morti

Secretary of Stat DIVISION OF CORPORTIONS Jan 29 1998 8:00am Secretary of State

**FILED** 

1998

P97000023945 (3) DOCUMENT #
1. Corporation Name

RODRIGUEZ TIRE & WHEEL, INC.

Principal Place	of Business
1224 1/2 N.W.	AVENUE L
RELIE GLADE	

Mailing Address



1224 1/2 N.W. AVENUE L BELLE GLADE FL 33430 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/11/1997 2. Principal Place of Business 2a. Mailing Address FFI Number Applied For -073 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Zip Country 24 29 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name RODRIGUEZ, ELIAS 1224 1/2 N.W. AVENUE L 82 Street Address (P.O. Box Number is Not Acceptable) **BELLE GLADE FL 33430** 83 84 City 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. **SIGNATURE** Signature, typed or printed name of registered agent and like it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.3 TITLE RODRIGUEZ, ELIAS NAME 1.2 NAME 1224 1/2 N.W. AVENUE L 1.3 STREET ADORESS STREET ADDRESS **BELLE GLADE FL 33430** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition Change 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I 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 appears in

Block 12 or Block 13 if changed, or on an attachment with an address.