

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90446 003 ***150.00

DOCUMENT # P97000107868

1. Entity Name

MASTER LUBE, TUNE & TIRE, INC.



Principal Place of Business

3021 GULF BREEZE PARKWAY
GULF BREEZE FL 32563

Mailing Address

6222 N 9TH AVE
PENSACOLA FL 32504

2. Principal Place of Business

3. Mailing Address

3021 Gulf Breeze Pkwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Gulf Breeze, FL

4. FEI Number

59-3613794

Applied For

Not Applicable

Zip

Country

Zip

32563

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITE, MICHAEL A
6222 N 9TH AVE
PENSACOLA FL 32504

Name

White, Michael A

Street Address (P.O. Box Number is Not Acceptable)

3021 Gulf Breeze Parkway

City

Gulf Breeze

FL

Zip Code

32563

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Michael A. White, Pres.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	WHITE, MICHAEL A	
STREET ADDRESS	3021 GULF BREEZE PARKWAY	
CITY-ST-ZIP	GULF BREEZE FL 32563	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MELOSKIE, CHRIS	
STREET ADDRESS	3021 GULF BREEZE PKWY	
CITY-ST-ZIP	GULF BREEZE FL 32563	
TITLE	S	<input type="checkbox"/> Delete
NAME	HICKS, TERRY B	
STREET ADDRESS	3021 GULF BREEZE PARKWAY	
CITY-ST-ZIP	GULF BREEZE FL 32563	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	PITTS, JEANETTE	
STREET ADDRESS	3021 GULFBREEZE PKWY	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TERRY B Hicks
3021 Gulf Breeze Pkwy
Gulf Breeze, FL 32563

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael A. White, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850 932-