**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000046521

1. Corporation Name

MARTINO TIRE CO. OF CLEVELAND AVE.

## FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90088 001 \*3,000.00



Principal Plac	e of Business	Mailing Address					
13155 SW 132 AVENUE 13155 SW 132 AVENUE					{		
MIAMI FL 3318	6	MIAMI FL 33186					
					DO NOT WRITE IN 1	HIS SPACE	
					3. Date Incorporated or Qualifed		
D - 15	to a d During	La Ballia Addasa			05/22/1998	<del></del>	
- 118/10	lace of Business 8 Cleveland Ave	2a. Mailing Address			4. FEI Number 08 3 8810	<del></del>	Applied For
21 402		<del>-   -   -   -   -   -   -   -   -   -  </del>			09-09 70910		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional Required
22		City & State					
	City & State City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
23 <b>F† N</b> Zip					<del></del>		lorees
		29 30	Countr	,	<ol> <li>This corporation owes the current year Personal Property Tax.</li> </ol>	ir intangibie ☐ Yes	□No
24 334	9 Name and Address of Curren		<del>''</del>		10. Name and Address of New Registe		
	g. Hame and Address of Carren	Fregistered Agent	8	I Name	10, Maine and Magness of Most Registe		
KUK	ER, HOWARD L		L		·		
9200 SO. DADELAND BLVD SUITE 508				Street Ad	dress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33156				1		<del></del> -	
			8:	1			
			8	City		FL 85 Zip	Code
		D - 4 007 4500 FI - 21- 01 4 4			rporation submits this statement for the purpos		- ro-intound
office or r	egistered agent, or both, in the State of medical medi	of Florida. Such change was auth	orized b	the corpora	tion's board of directors. I hereby accept the a	ppointment as r	egistered
SIGNATURE							
	Signature, typed or printed name of registered agen			ent signature requ	ired when reinstating) DAT		
12.	<del>, _ , _ , _ , _ , _ , _ , _ , _ , _ , _</del>	D DIRECTORS  ☐ DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT  Change	
TITLE	D AMADYING ANDV	LI DELETE	1.1 TITLE	{			
NAME	MARTINO, ANDY	i	1.2 NAME	(			
STREET ADDRESS	13155 SW 132 AVENUE			ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186	□ Del ETE	1.4 CITY-	ST-ZIP		Channe	- Addition
TITLE	D	☐ DELETE	2.1 TITLE	{		☐ Change	☐ Addition
NAME	MARTINO, SOLOMON		2.2 NAME				
STREET ADDRESS	-13155 SW 132 AVENUE		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	<u></u>		2. 4 CITY-	ST-ZIP			——————————————————————————————————————
TITLE	D	☐ DELETE	3.1 TITLE		_	Change	Addition
NAME	MARTINO, EDWARD E		3.2 NAME	Į	•.		
STREET ADDRESS			3.3 STREE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186		3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME		·	4. 2 NAME	.			
STREET ADDRESS			4.3 STREE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		_ <del>-</del>	
TITLE		☐ DELETE	5.1 TITLE	_ _		☐ Change	☐ Addition
NAME			5.2 NAME	1			
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME	•		6.2 NAME	{			
STREET ADDRESS			6.3 STREE	TADDRESS			

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, with all other like empowered.

SIGNATURE:

<u> 305-255-0855</u>