

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000065225 1. Corporation Name

TIRE SAVERS, INC.

Principal Place of Business
1126 SOUTH FEDERAL HIGHWAY

FILED Mar 10, 1999 8:00 am **Secretary of State**

03-10-1999 90219 015 ***150.00



Mailing Address 1126 SOUTH FEDERAL HIGHWAY DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 3. Date Incorporated or Qualifed 07/24/1998 FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-075-0929 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State П Added to Fees Trust Fund Contribution 28 23 Zip Country 6. This corporation owes the current year tntangible Zip Country Yes Personal Property Tax. 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent rederius NeumayEN AMERILAWYER-Street Address (P.O. Box Number is Not Accept 82 343 ALMERIA AVENUE 105 CORAL-GABLES-FL-33134 Dar Lauderdai 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, 1 am familia with and locally the obligations of, Section 607.0505, Florida Statutes. FEDERNO SIGNATURE (NOTE: R ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change DELETE 1.1 TITLE TITLE CR2E034 NEUMAYER, FEDERICO 12 NAME NAME 1126 SOUTH FEDERAL HIGHWAY, UNIT 105 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33316 1.4 City-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 2.1 TITLE TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY- ST-ZIP CITY-ST-ZP Addition ☐ Change DELETE 3 TTM 6 TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4, CITY-ST-ZIP CITY-ST-ZIP Change Addition - DELETE 4.1 TITLE--TITLE 4.2 NAME NAME A 1 STREET ACCIDES STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition 6.1 TITLE □ DELETE TIRE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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, with all other like empowered.

6.4 CITY ST-ZIP

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