

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000019988

1. Entity Name

FESTIVAL TIRES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2620 PALM AVE.

3. Mailing Address
2620 PALM AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
HIALEAH, FLORIDA

City & State
HIALEAH, FLORIDA

Zip
33012

Country

Zip
33012

Country

4. FEI Number

65-0899654

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
ORIOR TIRADO

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

2620 PALM AVE.

City
HIALEAH,

FL

Zip Code
33012

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

SIGNATURE

ORIOR TIRADO

8/20/02

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

(NOTE: Registered Agent signature required when reappointing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P/D
ORIOR TIRADO
2620 PALM AVE., HIALEAH, FL 33012

TITLE
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CITY- ST- ZIP

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IN THIS SPACE**

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****450.00 ****450.00

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

ORIOR TIRADO

8-20-02

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

FESTIVAL TIRES INC.
DOC. # P99000019988

Zal 2

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY



ORIOI TIRADO
PRESIDENT

SCAN ONLY DOCS

DOCUMENT TYPE

COR

FIC

GEN

DIRECTORY

CORUBR

CORREI

FICREG

FICEVT

GENUBR

DESCRIPTION

AR/UBR

REI

REG

REN

EVT

UBR

FILE DATE: 7/28

ANNOTATE:

YES

NO

LOGGED BY:

AD