

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107384

1. Entity Name

SUN TIRES BY FANECO, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90101 045 ***150.00

Principal Place of Business

Mailing Address

8262 NW SOUTH RIVER DRIVE
MEDLEY FL 33166

8262 NW SOUTH RIVER DRIVE
MEDLEY FL 33166

2. Principal Place of Business

8346-C NW SOUTH RIVER DR.

3. Mailing Address

8346-C NW SOUTH RIVER DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MEDLEY, FL

City & State

MEDLEY, FL

4. FEI Number

65-0966974

Applied For

Not Applicable

Zip

33166

Country

Zip

33166

Country

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

RIOS, LEOPOLDO
1800 WEST 49TH STREET
SUITE 207
HIALEAH FL 33012

Name

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

City

FL

Zip Code

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

Thick

05/01/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME FLITER, GASTON
STREET ADDRESS 8262 NW SOUTH RIVER DRIVE
CITY-ST-ZIP MEDLEY FL 33166 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8346-C NW SOUTH RIVER DR.
CITY-ST-ZIP MEDLEY, FL 33166

TITLE VTD
NAME ALABACI, DANIEL A
STREET ADDRESS 8262 NW SOUTH RIVER DRIVE
CITY-ST-ZIP MEDLEY FL 33166 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8346-C NW SOUTH RIVER DR.
CITY-ST-ZIP MEDLEY, FL 33166

TITLE SD
NAME VEGA, ALFRED
STREET ADDRESS 8262 NW SOUTH RIVER DRIVE
CITY-ST-ZIP MEDLEY FL 33166 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8346-C NW SOUTH RIVER DR.
CITY-ST-ZIP MEDLEY, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Samuel A. Holes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/00

Date

(305) 558 9669

Daytime Phone #

CR2F034 (9/93)