FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ' ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S81011

Principal Place of Bu
401 N.W. 79TH ST.
MIAMI EL 33150

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90009 016 ***150.00

ALEMAN	TIRE CORP.							
, ,,					1 1001/014 161 18	IST KIRIT BRIDI (KASI KIR) DIR	H AKAN AKAN AKAN A	611 612 11 1 66 1
	,							
Principal Place	e of Business	Mailing Address				181 11911 35 191 11831 1191 913	II MAMA BAMA MISIA MA	831 B1411 1081
401 N.W. 79TH ST. 401 N.W. 79TH ST.								
MIAMI FL 33150 MIAMI FL 33150					_			
						O NOT WRITE IN TH	IS SPACE	
	>				3. Date Incorporated	or Qualifed		j
		10- 14 W ATT			09/18/1991	17~v		No d For
	lace of Business	2a. Mailing Address		~ C-	4. FEI Number 65-0284208			lied For Applicable
21	# ata	26 \3930 S Suite, Apt. #, etc.	€.w.3	<u>0 34.</u>	0070204200		\$8.75 Ad	
Suite, Apt.	#, etc.	27 27 27 27 27 27 27 27 27 27 27 27 27 2			5. Certifcate of Statu	s Desired	Fee Req	
22 27					6. Election Campaig	n Financing	\$5.00 N	
23		⊢ 17	28 MIAMI FL		Trust Fund Contri		Added to	
Zip	Country	Zip	Cour	ntry		wes the current year	Intangible	
24	25	29 33175	30	AZ	Personal Property			□No
	9. Name and Address of Curre				10. Name and Addre	ss of New Registere	d Agent	
				81 Name				
ALEMAN, ROSENDO S.				82 Street A	ddress (P.O. Box Number is	Not Acceptable)	1-171	
401 N.W. 79TH ST.					30 5W 30	St.		
MIAN	MI FL 33150			83				
	<u>.</u>			84 City	<u> </u>		. 85 Zip C	ode
				1 , 1	tiami	F	L 33	เาร
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 607.1508, Florida Stat	utes, the at	ove-named c	orporation submits this state	ment for the purpose	of changing its requirement as requi	egistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statu	ites.	alibit's boald of directors.	nereby docopt and app	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATURE				_			` <u></u>	
	Signature, typed or printed name of registered ag			Agent signature rec	quired when reinstating)	GES TO OFFICERS	AND DIRECTOR	2S IN 12
12.	D OFFICERS A	ND DIRECTORS	13.	16	ADDITIONS/CHAIN	GES TO OFFICERS	Change	Addition
TITLE	ALEMAN, ROSENDO S.		1.2 NA					
NAME	401 N.W. 79TH ST.			REET ADDRESS	13930 SW 36	55.	•	
STREET ADDRESS	MIAMI FL				MIAM, FL	33175	,	
CITY-ST-ZIP	D	☐ DELETE	2,1 TIT	Y-ST-ZIP	191117191, 1 0	JJ1 1J	Change	Addition
NAME	ALEMAN, JORGE L.		2.2 NA					_
_	401 N.W. 79TH ST.			REET ADDRESS	13930 sw 3	2 6		
STREET ADDRESS	MIAMISEL = ==			TY-ST-ZIP =:	MIAMI FL	· 33:75		.
CITY-ST-ZIP TITLE	- MUNICIPE - FA	□ DELETE	3.1 TII		billium, i e		Change	☐ Addition
'NAME	*. •		3.2 NA					
STREET ADDRESS	•			REET ADDRESS				
				TY-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	4.1 TIT				☐ Change	☐ Addition
NAME	<i>j</i> .,		4. 2 N					
STREET ADDRESS	.*			REET ADDRESS				1
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		☐ DELETE	5.1 TII				Change	Addition
NAME			5.2 NA	ME			* *	{
STREET ADDRESS			5.3 ST	REET ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	6.1 TIT	ī.E			Change	☐ Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET ADDRESS				ļ
	35 315		1	1				

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.