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

**PROFIT CORPORATION** ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

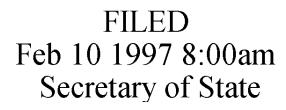
DOCUMENT #

(6)

J.J.S. TIRES, INC.

Principal Place of Business

Mailing Address





60 WEST PROSPECT ROAD OAKLAND FL 33309		60 WEST PROSPECT ROAD OAKLAND FL 33309-3922					
					3. Date Incorporated or Qualified 11/25/1991	3a. Date of Last R 04/30/1996	Report
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	A	oplied For	
21		26			65-0300875		ot Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country			/	8. This corporation has liability for intangible tax under s. 199.032,		. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Curre	ent Registered Agent		T	10. Name and Address of New Re	gistered Agent	
	ISTON, JOSEPH		81	Name			
	2 WHITE OAK LANE		<b>B2</b> Street Addre		lress (P.O. Box Number is Not Acceptab	ile)	
TAN	MARAC FL 33319		83	ļ			
			63				
			84	City		FL 85 Zip	Code
44 0	1. No. 2007 00	00 and 607 1600. Elocido Ctoliu	les the abov	o pamed our	poration submits this statement for the p	urposs of shanging i	ls registered
11. Pursuant office or r	to the provisions of Sections 607.00 registered agent, or both, in the Stat	te of Florida, Such change was	authorized b	y the corpora	poration submits this statement for the patients board of directors. I hereby accep	ot the appointment as	registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, FI	lorida Statute	S			Į
SIGNATURE	Signature, typed or printed name of registered a	neut and the diameter after the total	II - Breaisteren Ar	eni signal re reou	ired when reinstating)	DATE	
12.		ND DIRECTORS	13.	The original and the que	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	P	DELETE	1.1 7/1LE			Change	Addition
NAME	WINSTON, JOE		1.2 NAME				
STREET ADDRESS	•• • • • • • • • •		13 STREE	T ADDRESS			li li
CITY-ST-ZIP	AAVIAND DADY EI		1.4 CITY-	SI - 7IP			
TITLE	V	DELETE ?				Change	Addition
NAME			2.2 NAME				
STREET ADDRESS	60 W. PROSPECT RD.		2.3 STREE	1 ADDRESS			
CITY-ST-ZIP	OAKLAND PARK FL		2.4 CDY	S1-ZIP			
TITLE	ST DELETE		3.1 TITLE			☐ Change	Addition
NAME	PATAZNICK, SUSAN		3.2 NAME		. •		ļ
STREET ADDRESS	60 W. PROSPECT RD.			1 ADDRESS			ŀ
CITY-ST-ZIP	OAKLAND PARK FL		3 4. CITY	S1 - 7(P		Change	Addition
TITLE		L DELETE	4.1 TITLE			Onlings	L. Addition
NAME			4 2 NAMI				
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP		DELETE	44 CHY-	21-11		Change	Addition
TITLE			5.2 NAME			en charge	
NAME STREET ADDRESS			i i	T ADDRESS			
			5.4 City				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	01-411	The state of the s	Change	Addition
NAME			G.2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			6.4 CHY-				
0.11 - 01 - 21			00.11		1 0 1 140 07(0)(1) E) 1 0 1 L		

14. I do 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