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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V58657

(0)

BIG G	AUTO TECH AND TIRE S	ALES, INC.		A NOON AHAAN AHAA KUKA KUKA KUKA KANA KANA KANA K	: Lini anan suan angu anan mar
Principal Place	e of Business	Mailing Address	····	I LOBAL BLIGGT BLIGK TOLIK BLIGT BLIFT FORT BLEAT B	LOIS ESON OIGH EIGH GION GION IGG
337 W 75TH PL 337 W 75TH PL HIALEAH FL 33014					
				DO NOT WOITE IN THE	C DDA CE
				DO NOT WRITE IN THE 3. Date Incorporated or Qualified	S SPACE
				08/19/1992	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 26		26		65-0353425	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the or Personal Property Tax due June 30.	current year Intangible
	9. Name and Address of Curr		T T	10. Name and Address of New Registers	d Agent
	LINDO, JOAQUIN G		81 Name		
337 W. 5TH PL			82 Street Add	iress (P.O. Box Number is Not Acceptable)	
HIALEAH FL 33014					
			63		
			84 City	F	85 Zip Code
11 Purcuent I	o the provisions of Sections 607 O	502 and 607 1509. Florida Statu	ites the shove-nemed cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	
SIGNATURE	Signature, typed or printed name of registered a	igent and tille if applicable (NC	TE Registered Agent signature requ	ulred when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change
TITLE	GALINDO, JOAQUIN G	☐ DELETE	1.1 TOTLE		The Theorem
NAME OTDEET ADDOCCO	337 W 75TH PL		1.2 NAME		
STREET ADDRESS	HIALEAH FL		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	21 TITLE		Change Addition
NAME			2.2 NAME		-
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-SI-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADORESS		
CITY-ST-ZIP		T prices	3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME OTDEET ADODESS			4.2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition

6.3 STREET ADDRESS

SIGNATURE: JOAQUIN GALINDO

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section indicated on this annual report or supplemental annual report is true and accurate and that my signalizes half officer or director of the corporation or the receiver or trustee empowered to execute this report as required to Block 12 or Block 13 if changed, or on an attachment with an address.

STREET ADDRESS

CITY-ST-ZIP

17/95-8220801

orida Statutes. I further certify that the information

FILED

Apr 27 1998 8:00am

Secretary of State