2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#838204

FILED Feb 22, 2005 Secretary of State

Entity Name: ANDALUSIA TIRE COMPANY, INC.

Current P	rincipal Place	of Business:	New Principal Plac	e of Business:
	SS WEST			
POB 446 ANDALUS	IA, AL 36420			
Current M	ailing Addres	s:	New Mailing Addre	ess:
POB 446	SS WEST			
FEI Number:	63-0650237	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1200 S. PII	ORATION SYS NE ISLAND RC ON, FL 33324	PAD		
		ubmits this statement for the n	urpose of changing its register	red office or registered agent, or both,
	named entity s e of Florida.	abilitis tilis statement for the p		
	e of Florida. ´	abilities this statement for the p	p	
n the State	e of Florida. ´ RE:	ic Signature of Registered Age		Date
in the State	e of Florida. ´ RE: Electron	·		Date
n the State SIGNATUF	e of Florida. ´ RE: Electron	ic Signature of Registered Age Trust Fund Contribution ().	nt	Date GES TO OFFICERS AND DIRECTOR
n the State SIGNATUF	e of Florida. RE: Electron npaign Financing S AND DIREC	ic Signature of Registered Age Trust Fund Contribution (). TORS: Delete B II EST	nt	
in the State SIGNATUF Election Car OFFICERS Title: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIREC P () CATON, JAMES 850 BYPASS W ANDALUSIA, AL	ic Signature of Registered Age Trust Fund Contribution (). FORS: Delete B II EST 36420 Delete CIA E., TN RD	nt ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
n the State SIGNATUF Election Car OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIRECT P () CATON, JAMES 850 BYPASS W ANDALUSIA, AL SC () CATON, PATRIC 1300 BROOKLY ANDALUSIA, AL	ic Signature of Registered Age Trust Fund Contribution (). TORS: Delete B II EST 36420 Delete CIA E., N RD 36420 Delete Delete	nt ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREG CATON T 02/22/2005