## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED Mar 10, 2008 8:00 am Secretary of State

Mailing Address   925 WEST LANCASTER ROAD   ORLANDO, Pt. 32809   ORLAN	DOCUMENT # K30885  1. Entity Name MILLER BROS. GIANT TIRE SERVICE - ORLANDO, INC.					03-10-200	8 90068 046 ***1	58.75	
9.5 WEST LANCASTER ROAD ORLANDO, FL 32809  2. Principal Place of Business - No P.O. Box # P.O. Box	Principal Place of Business Mailing Address					-			
Solition April + ord:   Soli	925 WEST LANCASTER ROAD 925 WEST LANCASTER ROAD			AD					
Suite, Apt. 4, etc.				110					
Type   Country   20   Country   20   Country   59-2902373   S. Certificate of Satus Desired   S. 75 Additional Fee Required   Street Address of New Registered Agent   Street Address (P.O. Box Number is Not Acceptable)	Suite, Apt. #, etc.				01112008	Chg-P	CR2E034 (12/06)		
Sicel Address (P.O. Box Number is Not Acceptable)  Fee Required  T. Name and Address of New Registered Agent  T. Name and Address of New Registered Agent  Name  Sicel Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  City  FL  Sicel Address (P.O. Box Number is Not Acceptable)  The above named entity submiss this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, free or or ried name of registered agent socials if attacketies  NOTE: Registered Agent spinture required required in the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  Greative Agent Spinture required agent socials if attacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and in a stacketies  NOTE: Registered Agent spinture required agent and a stacketies  NOTE: Registered Agent spinture required agent and a stacketies  NOTE: Registered Agent spinture required agent and a stacketies  NOTE: Registered Agent spinture required agent and a stacketies  NOTE: Registered Agent spinture req	City & State		I <i></i> ' C A				<del></del>	<u> </u>	
Name	Zip	Country		•	5. Certificate	of Status Desired			
Street Address (P.O. Box Number is Not Acceptable)									
EUTZ, FL 33549  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE									
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    FILE NOWIII FEE IS \$150.00									
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tem familiar with, and accept the obligations of registered agent.  SIGNATURE    FILE NOWNIT FREE IS \$150.00   P. Election Campaign Financing Trust Fund Contribution   Separative Required Agent speakure required when revitating)   DATE				City			FI Zip Cod	в	
SIGNATURE									
### Sprause hybrid or private ray of registered agent are still a policiate.    No.									
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  ITILE PD	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent stansture required when reinstating)  DATE								
TITLE   PD	FILE NOWIN FEE IS \$150.00								
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mail. also do not in report or suppremental report is true and accurate and inclinating signature shall have the same legal effect as it 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.