


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 20, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000043120</b> 1. Entity Name SERIT TIRES WHOLESALE LTD. CO.	
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Principal Place of Business 12344 SW 136 STREET MIAMI, FL 33186	Mailing Address 12080 S.W. 127 AVE 202 MIAMI, FL 33186
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01072005No Chg-LLC      CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 32-0097758	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee F

6. Name and Address of Current Registered Agent

RODRIGUEZ, ERNIE  
 12080 S.W. 127 AVE  
 202  
 MIAMI, FL 33188

DO NOT WRITE IN THIS SPACE

8. The above named entity submits 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2005**

1100000186821  
01/21/05-80073-010 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	RODRIGUEZ, ERNIE
STREET ADDRESS	4421 SW 154 COURT
CITY - ST - ZIP	MIAMI, FL 33185
TITLE	MGR
NAME	LISTA, WALTER A
STREET ADDRESS	8210 SW 63 COURT
CITY - ST - ZIP	MIAMI, FL 33143
TITLE	MGR
NAME	ZARRALUQUI, JOSE L
STREET ADDRESS	1407 GENOA
CITY - ST - ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_ 1/7/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #