2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 668889				a l	FILED			
Entity Name RALLY TIRE CO.					06 JUL 31 AM 11: 47			
'					00 301	JI AMII:4	1	
					šeukl i	ARY OF STAT	F	
•		Mailing Address			TALLAHASSEE, FLORIDA			
101761 US I KEY LARGO,		101761 US I KEY LARGO, FL 33037					7 0	
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Principal Place of Business 3. Mailing Address								
	00 OVERSEAS HWY	•	12300 OVERSEAS HUM					
Suite, Apt.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		07212006 REINT AT CR2E098 (11/05) 05-0			
City & Stat	THON FL	City & State MARATHUM	City & State MARATHOW FL		mber 994548		Applied For———— Not Applicable	
Zip Country		Zip 22050			ate of Status Desired		Additional	
2000	6. Name and Address of Current Registered A				Fee Required 7. Name and Address of New Registered Agent			
SWARTZ FLAINE SUSAN W. CORBIN								
SWARTZ, ELAINE A NORTH DR					Imber is Not Acceptat		·	
4 NORTH DR KEY LARGO, FL 33037				185 OVE	RSEAS	HWY		
City A I A A						r ∎ Zin C	Code	
MAKA7+TON								
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 HOME SWARTZ 7/26/05								
Signature / ybed or printed name of registered agent and title if applicable. NUE SUART2 126 105								
					In accordance	with s. 607.193(2)(I	b) FS the	
FII	LE NOW!!! FEE IS \$300.00				corporation di	d not receive the pri	or notice.	
10.	OFFICERS AND D	IRECTORS	1			FFICERS AND DIRECTO	ORS IN 11	
TITLE NAME	PSTD SWARTZ, ELAINE	☐ Delete	TITLE			☐ Chang	ge 🔲 Addition	
STREET ADDRESS	4 NORTH DR	NAME STREET ADDRESS		2128 RA	28 RAINWATER RO			
CITY-ST-ZIP	KEY LARGO, FL 33037 CITY-SI-ZIP			DANDRIL	BE TN	37725 -	6921	
TITLE	D COMPANY MARKE	Delete	TITLE	!	7	☐ Chanç	e 🗀 Addition	
NAME STREET ADDRESS	SWARTZ, MARTI 4 NORTH DR		NAME Street Address	DITE RA	18 RAINWATER RO			
CITY-ST-ZIP	KEY LARGO, FL 33037		CITY-ST-ZIP	DANORIO	LE RAINWATER RO INORIOGE TN 37725-6921 LINCE SWARTZ Change Production			
TITLE		☐ Delete	TITLE	, D	SUMPTO	☐ Chang	ge Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	l				
CITY-ST-ZIP			CITY-ST-ZIP	MARAT	OVERSEAS	33050		
TITLE	Mala	Delete	TITLE			☐ Chang		
NAME	(1/ (4) c		NAME		<u> </u>	:48485 :5 64012 **3) 	
STREET ADDRESS CITY-ST-ZIP	β		STREET ADDRESS CITY-ST-ZIP	D8/	.08\08010£	54U12 **3	00.00	
TITLE		Delete	TITLE			Chang	ge Addition	
NAME			NAME				,	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Chang	pe	
NAME		□ Delete	NAME				Je 🗀 Addition	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP	portify that the information availand with t	nin filing dage not qualify for	CITY-ST-ZIP	anniand in Chanta	110. Decide Consul	4.6 - 4.6		
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature is shall have the same legal effect as if made under oath; that I am an officer or director of the comparition or the receiver of trustee employered to effect this report as required by Chapter 607. Florida Statutes, and that my represent a place the first of the comparities and that my report appears in Place the first of the comparities and the my report appears in Place the first of the comparities and the my report appears in Place the first of the comparities and the my report appears in Place the first of the comparities and the my report is placed.								
of the corporation or the receiver or trustee empowered to expecte 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.								
SIGNATURE: /ame/ /was 7/26/05 305-289-7238								
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #								
LANCE SWARTZ								