2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F61094

FILED Oct 29, 2004 Secretary of State

Entity Name: DOC TYRE'S SUNSHINE AUTO SERVICE AND SALES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
765 PARK HOMESTI	WAY EAD, FL 33030	06030		
Current Mailing Address:		New Mailing Address:		
765 PARK HOMESTE	WAY EAD, FL 33030	06030		
FEI Number	: 59-2150325	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
	RS, THOMAS E TH KROME AV FAD FI			
	_,,			
	,	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
in the Stat	e named entity : e of Florida.	submits this statement for the բ	ourpose of changing its registere	d office or registered agent, or both,
n the Stat	e named entity see of Florida. RE:	submits this statement for the particles of Registered Agric Signature of Registered Agr		d office or registered agent, or both, Date
in the Stat SIGNATU In accordan	e named entity se of Florida. RE: Electror	nic Signature of Registered Ago 3(2)(b), F.S., the corporation did no	ent	
in the Stat SIGNATU In accordan Election Ca	e named entity se of Florida. RE: Electror	nic Signature of Registered Ago 3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.	
in the Stati SIGNATU In accordan	e named entity se of Florida. RE: Electror ice with s. 607.19 impaign Financing S AND DIREC	nic Signature of Registered Agr 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS: Delete TH R, ST	ent ot receive the prior notice.	Date
in the Stati SIGNATU in accordant Election Car OFFICER Title: Name: Address:	e named entity se of Florida. RE: Electror Ince with s. 607.19 Impaign Financing S AND DIREC P TYRE, KENNET 1450 NE 10TH HOMESTEAD,	nic Signature of Registered Agr 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS: n Delete TH R, ST FL n Delete	ent of receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: JAN M. TYRE V/P 10/29/2004