

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 8:00 am
Secretary of State

03-05-2004 90015 021 ***158.75

DOCUMENT # G17679 1. Entity Name TIRE COUNTRY CORP.					
Principal Place of Business 1280 S. DIXIE HWY E. POMPAÑO BEACH, FL 33060			Mailing Address C/O IVAN A. GOMEZ ESQ 601 BRICKELL KEY DRIVE SUITE 507 MIAMI, FL 33131		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GARCIA, BERNARDO 19130 N. BAY RD. N. MIAMI BCH., FL 33160				Name IAG CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 601 Brickell Key Drive, Suite 507 City Miami FL Zip Code 33131	
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. By: <u>IAG CORPORATE SERVICES, INC.</u> Signature: <u>Ivan A. Gomez, President</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>2/23/04</u>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P	Delete ☐		TITLE NAME	Change ☐ Addition ☐	
NAME GARCIA, BERNARDO			NAME		
STREET ADDRESS 19130 N. BAY RD.			STREET ADDRESS		
CITY-ST-ZIP N. MIAMI BCH., FL			CITY-ST-ZIP		
TITLE	Delete ☐		TITLE	Change ☐ Addition ☐	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	Delete ☐		TITLE	Change ☐ Addition ☐	
NAME			NAME		
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CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	Delete ☐		TITLE	Change ☐ Addition ☐	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Bernardo Garcia</u> (305) 371-9213 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					
BERNARDO GARCIA, President					

