

FROM : ROBERT S NUTTER CPA PA

PHONE NO. : 561 840 1913

Feb. 11 2005 12:54PM P1

FILED**Feb 18, 2005 08:00 AM**
Secretary of State**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # H05617 1. Entity Name WITTBOLD TIRES, INC.																													
Principal Place of Business % JAMES WITTBOLD 1915 CHURCH ST. WEST PALM BEACH, FL 33409		Mailing Address % JAMES WITTBOLD 1915 CHURCH ST. WEST PALM BEACH, FL 33409																											
DO NOT WRITE IN THIS SPACE																													
2. Name and Address of Current Registered Agent WITTBOLD, JAMES 1915 CHURCH STREET WEST PALM BEACH, FL 33909		DO NOT WRITE IN THIS SPACE																											
3. 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		4. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee																											
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td>VT</td> </tr> <tr> <td>NAME</td> <td>WITTBOLD, JAMES</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1915 CHURCH ST</td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>WP PALM BCH., FL</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>		TITLE	VT	NAME	WITTBOLD, JAMES	STREET ADDRESS	1915 CHURCH ST	CITY- ST- ZIP	WP PALM BCH., FL																			DO NOT WRITE IN THIS SPACE	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 filers empowered.																													
SIGNATURE: <i>[Signature]</i> James M. Wittbold		Date: 2/16/05 (561) 686-3980																											



02112005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2431202	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

 1100000235232
 02/18/05-80053-007. 150.00