

FROM : COLDWELL BANKER

FAX NO. : 7278348336

Apr. 18 2006 8:17 AM

FILED
Apr 21, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # J80346 7. Entry Name 3-D TIRE, INC.				
Principal Place of Business 2689 MONTAGUE CT W CLEARWATER, FL 33761 US		Mailing Address 2689 MONTAGUE CT W CLEARWATER, FL 33761 US		
DO NOT WRITE IN THIS SPACE				
6. Name and Address of Current Registered Agent EARLY, DON H. 2689 MONTAGUE CT WEST CLEARWATER, FL 34621		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: _____ <small>Signature, typed or printed name of registered agent and date if applicable.</small>		DATE: _____ <small>DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$250.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE		
TITLE	P			00000522558 05/03/06-80034-000 150.00
NAME	EARLEY, DON H			
STREET ADDRESS	2689 MONTAGUE CT WEST			
CITY-ST-ZIP	CLEARWATER, FL 34621			
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
12. I hereby 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 reflected 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 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>Don H. Early</u>		H-18-06 727-804-6269		

Tallahassee, FL 32301

Questions?

Phone: (850) 245-6056

Hearing/Voice Impaired may call (850) 245-6096 (TDD)

INFORMATION REGARDING RETURNED CHECK

If the check submitted with this report is returned by a bank for any reason, the report will be cancelled and considered not filed. The Department of State will dissolve/revoke the entity if a replacement payment with service charge and report are not resubmitted within the prescribed time frame.

No Chg-P CR2E034 (11/05)