

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K09332

FILED
Apr 16, 2009
Secretary of State

Entity Name: TIRE SUPERMARKET, INC.

Current Principal Place of Business:

C/O CARLOS LARGAESPADA
6201 S.W. 8TH STREET
MIAMI, FL 331444809

New Principal Place of Business:

Current Mailing Address:

C/O CARLOS LARGAESPADA
6201 S.W. 8TH STREET
MIAMI, FL 331444809

New Mailing Address:

FEI Number: 65-0019778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARGAESPADA, CARLOS
6201 S.W. 8TH STREET
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LARGAESPADA, CARLOS
Address: 3550 SW 193 AVENUE
City-St-Zip: MIAMI, F; 33175

Title: S () Delete
Name: LARGAESPADA, CECILIA
Address: 3550 SW 139 AVENUE
City-St-Zip: MIAMI, FL 33175

Title: V () Delete
Name: LARGAESPADA, JAVIER
Address: 3550 SW 139 AVE
City-St-Zip: MIAMI, FL 33175

Title: T () Delete
Name: LARGAESPADA, CARLOS JR
Address: 3550 SW 139 AVE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LARGAESPADA, CARLOS
Address: 3550 SW 139 AVENUE
City-St-Zip: MIAMI, FL 33175

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CARLOS LARGAESPADA

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04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date