

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003252

FILED  
Aug 29, 2007  
Secretary of State

**Entity Name:** TIRE ENGINEERING & DISTRIBUTION, L.L.C.

**Current Principal Place of Business:**

2511 BEE RIDGE RD  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

2511 BEE RIDGE RD  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:** 65-1001744      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

RUSSELL, JEFFREY S  
240 S. PINEAPPLE AVE.  
10TH FLOOR  
SARASOTA, FL 34228 US

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FISHMAN, JORDAN  
Address: 4015 FLAMINGO AVE  
City-St-Zip: SARASOTA, FL 34242

Title: MGRM ( ) Delete  
Name: KILLMISTER, JOHN  
Address: BERESFORD HOUSE  
City-St-Zip: BELLOZANNE ROAD, ST HEILIER,

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JORDAN FISHMAN

MGRM

08/29/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date