2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 02, 2008 08:00 All Secretary of State DOCUMENT # L04000002911 1. Entity Name TIRES ETC, LLC Principal Place of Business Mailing Address 6660 HWY 90 3103 GLASGOW CT. MILTON, FL 32570 US MILTON, FL 32583 DO NOT WRITE IN THIS SPACE 03272008 No Chg-LLC CR2E083 (12/07) Applied For 4. FEI Number 27-0076141 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DANIEL, JOHN P 3 W. GARDEN ST, STE 700 PENSACOLA, FL 32501 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE U00000878249 04/14/08-80047-008 138.75 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE MR. BURKS, BARNEY B JR. NAME STREET ADDRESS 3103 GLASGOW CT. MILTON, FL 32583 CITY-ST-71P TITLE NAME STREET ADDRESS CITY-ST-712 TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am a managing member or manager of the limited liability company or the secure or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #

FILED