2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000058759

1. Entity Name
ALL TIRES OF MONROE COUNTY, L.L.C.



FILED
Apr 13, 2007 08:00 AM
Secretary of State

Principal Place of Business

97951 OVERSEAS HIGHWAY KEY LARGO, FL 33037 Mailing Address

PO BOX 888

KEY LARGO, FL 33037



01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3045062

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STOIA, SAMUEL C 97561 OVERSEAS HIGHWAY KEY LARGO, FL 33037

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SIGNATURE.	Signature, typed or printed name of registered agent and trie if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee Is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STOIA, SAMUEL C PO BOX 888 KEY LARGO, FL 33037		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AUSTIN, ALANA B PO BOX 888 KEY LARGO, FL 33037		000000704878 04/23/07-80028-021 50.00
TITLE NAME STREET ADDRESS CITY-SI-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. 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 indicated on this report is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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