2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L61810

FILED Apr 17, 2009 Secretary of State

Entity Name: TRIANGLE AUTO AND TIRE SERVICE, INC.

Current P	rincipal Place	of Bus	siness:	New Principal Plac	e of Business:
	ES CREEK PK ISLAND, FL 3		US		
Current M	lailing Addre	ss:		New Mailing Addre	ss:
	ES CREEK PK ISLAND, FL 3		US		
El Number	: 59-3004391	FEIN	umber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of (Current	Registered Agent:	Name and Address	of New Registered Agent:
510 SYK	MARCUS ES CREEK PK	:WY 52 U	s		
/IERRITT	ISLD, FL 329	<i>32</i> 0			
/IERRITT he above				purpose of changing its register	red office or registered agent, or both,
/IERRITT he above	named entity of Florida			purpose of changing its register	red office or registered agent, or both,
MERRITT The above the State	named entity e of Florida. RE:	submits			red office or registered agent, or both, Date
MERRITT The above the State SIGNATUI	named entity e of Florida. RE: Electro	submits	this statement for the		
MERRITT The above in the State SIGNATUI	named entity e of Florida. RE: Electro	submits nic Sign g Trust F	this statement for the ature of Registered Ag	ent	
MERRITT The above in the State SIGNATUI	named entity e of Florida. RE: Electro mpaign Financin S AND DIREC	submits nic Sign g Trust F ETORS:) Delete CUS DAK DR	ature of Registered Ag	ent	Date
MERRITT The above on the State SIGNATUI Clection Car DFFICER: ittle: lame: ddress:	named entity e of Florida. RE: Electro mpaign Financin S AND DIREC P (HERMAN, MAF 3015 WATER (MERRITT ISLA	submits nic Sign g Trust F TORS:) Delete RCUS DAK DR ND, FL 3	ature of Registered Ag fund Contribution ().	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR

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: ROBERT TURMAN VP 04/17/2009