


**2005 FOR PROEIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2005 08:00 AM
Secretary of State

DOCUMENT # M82352 1. Entity Name SOUTHERN INDUSTRIAL TIRE OF SOUTH FLORIDA, INC.	
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Principal Place of Business 2995 NW 76TH ST. MIAMI, FL 33147 US	Mailing Address 2995 NW 76TH ST. MIAMI, FL 33147 US
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DO NOT WRITE IN THIS SPACE



04082005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0191304	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOUDIE, ENRIQUE
15961 NW 79TH COURT
MIAMI LAKES, FL 33016

**DO NOT WRITE
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

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COX, BARRY SKALDENSTRAAT 121-CI B-9042 GENT BELGIUM,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MASSON, DANIEL 6 RUE HENNER 75009 PARIS FRANCE,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOUDIE, ENRIQUE 15961 NW 79TH COURT MIAMI LAKES, FL 33016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/16/05-80048-016 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/11/05 (305) 696-1976
Date Daytime Phone #