2006 FOR PROFIT CO PORATION ANNUAL REPORT

FILED Jun 19, 2006 08:00 Al Secretary of State **DOCUMENT # P00000074969** MACHINE AUTO TIRE SERVICES, INC. Principal Place of Business Mailing Address 9050 S.W. 40TH STREET 9050 S.W. 40TH STREET MIAMI, FL 33165 MIAMI, FL 33165 No Chg-P CR2E034 (11/05) 06152006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1030453 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MACHIN, ERASMO DO NOT WRITE 9050 S.W. 40TH STREET MIAMI, FL 33165 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. U00000567389 SIGNATURE. 06/19/06-98898, 918-159, 88- (NOTE Registered Agent signature required when reinstating) arie of registered agent and title if applicable 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS 10. TITLE MACHIN, ERASMO NAME STREET ADDRESS 9050 SW 40ST CITY-ST-ZIP MIAMI, FL 33165 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. 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 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone