PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 MAR 26 AM 10: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # _ P01000017472 ____

1. Corporation Name

103RD STREET TIRES CORP.

•						1		,		
Principal Pl	ace of Busine	ss	Mailing Addr	ess				S 16001 10011 01011 10011 1001		
3500 NW 103RD STREET 3500 NW 10 MIAMI FL 33147 MIAMI FL 3				BRD STREET 147		((ani)) and				
						REI	nstatem	ENT OZ-O	3	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.							Canada Canada May			
				lling Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 02/15/2001				
Suite, Apt. #, etc.						5. FEI Number Applied For				
City & State				•			·	Not Applicab	ile	
Zip Country			Zip		Country			\$8.75 Additional Fee requi for a Certificate of Statu		
7. Names a	and Street Ad	dresses of Each Officer and	/or Director (Flo	rida nonprof	fit corporations must list at I	east 3 directors)			=	
Title(s)	- 2	- Name of Officers and/or Directors		3	Street Address of Ea Officer and/or Direct	ch	City /	State / Zip	1	
PD	MESA, EMMA			+	ST 77 STREET	_ 	HIALEAH FL 33014			
'0	MEOA, EM	· NIV		0/3 1166	or or other		,			
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			<u> </u>	<i>~</i>		4	-2		<u> </u>	
				\$00014694985 03/26/0301004015 **500.00						
					500014694985 03/26/0301004016 **400.0					
						U3/26/	<u> 1301004016</u> 	<u>**400.00</u>	\dashv	
		·		<u> </u>					_	
8. Name and Address of Current Registered Agent							9. Name and Address of New Registered Agent			
MESA	EMMA				Name	Name 58 m C				
MESA, EMMA 875 West 77 Street					Street Address (P.O. Box Number is Not Acceptable)				CROFOAD (RIDO	
HIALEAH FL 33014					Suite, Apt. #, Etc.					
					City		Str	ate Zip Code	\dashv	
10. I, being	appointed the	e registered agent of the ab	ove named corpo	oration, am t	amiliar with and accept the	obligations of Sec	tion 607.0505, F.S. or 617.0		-	
		7	7/	/						
Signature of		Signa	11/20		QUIRED		Date 3-7	7-69		
Registered /	Agent		EGISTERED AG				Date		-	
							apter 607 or 617, F.S. I furth			
	• •	-				•	s of section 607.0401 or 617 der section 119.07(3)(i), F.S		ed l	

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: