2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008
Secretary of State

DOCUMENT# P01000031950

Entity Name: DISCOUNT TIRE TOWN, INC.

Current Principal Place of Business:

701 W HILLSBOROUGH AVE
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

8001 N DALE MABRY HWY
BLG 401
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-2844456 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YOUNG & ASSOCIATES
C/O Z1Z1 YOUNG -KASPI
8001 N DALE MABRY HWY., # 401
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KASPI, MORDECHAY
Address: 701 W HILLSBOROUGH AVE
City-St-Zip: TAMPA, FL 33603

Title: VPSH ( ) Delete
Name: KASPI, ZIZI Y
Address: 8001 N DALE MABRY HWY., #401
City-St-Zip: TAMPA, FL 33614

Title: M ( ) Delete
Name: KASPI, NICOLE J
Address: 8001 N DALE MABRY HWY., #401
City-St-Zip: TAMPA, FL 33614

Title: M ( ) Delete
Name: KASPI, JEREMY
Address: 8001 N DALE MABRY HWY., # 401
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MORDECHAY KASPI P 04/04/2008

Electronic Signature of Signing Officer or Director — Date