## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000120865

Entity Name: LEONE TIRE & AUTO, INC.

515 CYPRESS VIEW DR.

OLDSMAR, FL 34677

Address:

City-St-Zip:

FILED Jan 15, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2424 US 19 NO. HOLIDAY, FL 34691 **Current Mailing Address: New Mailing Address:** 3826 TAMPA RD OLDSMAR, FL 34677 FEI Number: 94-3417157 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEONE, PAUL 542 LAKE CYPRESS CIRCLE OLDSMAR, FL 34677 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition LEONE, PAUL Name: Name: 542 LAKE CYPRESS CIRCLE Address: Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LEONE, MICHAEL Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL LEONE VP 01/15/2007