2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000017660 1. Entity Name BUDD TIRE & REPAIR, INC.									Fili			
Principal Plac	e of Busines:	S	Mailing Address					ZUUT AF	代 23	AH 10: 1	02	
6050 PLAZA DRIVE			6050 PLAZA DRIVE									
FT. MYERS, FL 33905 FT. MYERS, FL 33905								SECRE Tallah 	ASSEE	M	E	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04052007	REIN-P	CR2E	098 (1/07)		
City & State			City & State				4. FEI Numbe				oplied For ot Applicable	
Zip	Country Zip Cour		itry		5. Certificate	of Status Desired		\$8.75 Add				
	6. Name	and Address of Current	t Registered Agent		1		7. Name and	Address of New R	ealstered /	Fee Require	ea .	
						Name Vincent Dimarzo						
COTTER, RICHARD 6 100 ES TER O BLVD					Street Address (P.O. Box Number is Not Acceptable)							
FT MYERS BEACH, FL 33931					- (4	2050	o Plaz	a Drive				
					City F	1 N	Lyers	3d-o-o-	FL	Zip Cod	- 405	
8. The above	named entit	y submits this statement I	or the purpose of changing i	ls register		<u> </u>		h, in the State of Flo		77		
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 appendible. (NOTE: Registered Agent signature required when reinstating) DATE												
FILE NOW!!! FEE IS \$900.00												
10.		OFFICERS AND	DIRECTORS	11.	1.		ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
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city-st-zip 12. I hereby of indicated	on this repo	rt or supplemental report	th this filing does not qualify is true and accurate and tha	for the ext	emptions con ture shall hav	ve the sa	in Chapter 119 ame legal effec	, Florida Statutes, I t as if made under o	further cert	lify that the ir	nformation r or director	
12. I hereby of indicated of the cor	l on this repo poration or ti	rt or supplemental report ne receiver or trustee emp	th this filing does not qualify is true and accurate and tha powered to execute this repo, with all other the empowere	for the exit t my signa ort as requ	emptions con ture shall hav	ve the sa	in Chapter 119 ame legal effec	, Florida Statutes, I t as if made under o	further cert	lify that the ir	nformation r or director	
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