

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 28 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000080788

1. Corporation Name

NEBRASKA TIRES, CORP.

REINSTATEMENT 03

100024198191
10/28/03--01035--002 **150.00

2. Principal Office Address

4402 North Nebraska Avenue

3. Mailing Office Address

4403 North Nebraska Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

07/25/2002

City & State

Tampa Florida

City & State

Tampa Florida

5. FEI Number

55-0788556

Applied For

Not Applicable

Zip

Country U.S.A.

Zip

Country U.S.A.

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee
for Certificate of Status

7. Name and Address of Current Registered Agent

Name

Elvira Betancourth

Street Address (P.O. Box Number is Not Acceptable)

4402 North Nebraska Avenue

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33603-4147

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Elvira Betancourth

REGISTERED AGENT MUST SIGN

Date 08/ 25/2003

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	ELVIRA BETANCOURTH	P O -BOX 8447	Tampa Florida 33674

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Elvira Betancourth

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/25/2003 (305) 362-9139

Date

Daytime Phone #

October 20, 2003
Ref: Nebraska Times Corp
Document # P02000'086788

Ne. Dept of State
Division of Corporations

Gentleman: As per letter received from your office concerning my Corporation Annual Report, hereby I am sending a ~~restatement~~ ~~from~~ with a check of \$100.00, as I spoke over the phone with an agent I never received a prior notice, or information regarding this annual fee, this is my first time in business and I was not aware of this yearly payment, thanks for helping me in update my Corporation, and from now on, this will not happen to me again.

Sincerely,

Elvira Betancourt