

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021908

FILED  
Mar 02, 2004  
Secretary of State

Entity Name: MOBILE TIRE CONNECTION INC.

## Current Principal Place of Business:

30 N.E. 99TH STREET  
MIAMI SHORE, FL 33138 US

## New Principal Place of Business:

30 N.E. 99TH STREET  
MIAMI SHORES, FL 33138 US

## Current Mailing Address:

30 N.E. 99TH STREET  
MIAMI SHORE, FL 33138 US

## New Mailing Address:

FEI Number: 65-0888451      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HINDS, GREGORY M  
30 N.E. 99TH STREET  
MIAMI SHORES, FL 33138 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 (X).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HINDS, GREGORY M  
Address: 30 N.E. 99TH STREET  
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: VP ( ) Delete  
Name: LEO, SONDY  
Address: 14085 N.E. 16TH AVE.  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: DIR (X) Delete  
Name: XION TECHNOLOGIES IN, C.  
Address: 30 N.E. 99TH STREET  
City-St-Zip: MIAMI SHORES, FL 33138 US

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GREGORY HINDS

P

03/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date