## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 30, 2007 8:00 am Secretary of State

OCUMENT # P0300050666  Entity Name NIMEE TIRES CORPORATION				05-30-20	07 90006 037 ***150.0i
900 W 29 ST 900 W	Mailing Address 900 W 29 ST HIALEAH, FL 33012				
DO NOT WRITE IN THIS SPACE			04292007  4. FEt Number 56-235  5. Certificate		CR2E034 (11/05)  Applied For Not Applicable S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent FORNARIZ, RAMON 8220 SW 141 ST MIAMI, FL 33158		DO NOT WRITE IN THIS SPACE			
<ol> <li>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.</li> </ol>					
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOWILL FEE 18 \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				NOT W	
TITLE MAME  STREET ADDRESS  CITY-ST-ZPP  12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if Changed, or on an attachment with an address, with all other like empowered.  SIGNATURE:  BUSINESS  Description of Provide Statute AND TYPED OR PROVIDED RANGE OF EXERT OR DESCRIPTION.					