2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007
Secretary of State

DOCUMENT# P03000101784

Entity Name: TIRES WAY OF AMERICA INC.

Current Principal Place of Business:

6200 E. COLONIAL DR IVE
BLDG 2
ORLANDO, FL 32807 US

New Principal Place of Business:

1516 E COLONIAL DR
SUITE 107
ORLANDO, FL 32803 US

Current Mailing Address:

6200 E. COLONIAL DRIVE
BLDG 2
ORLANDO, FL 32803 US

New Mailing Address:

1516 E COLONIAL DR
SUITE 107
ORLANDO, FL 32803 US

FEI Number: 41-2108889 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHRST DR
SUITE 246
ORLANDO, FL 32819 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 ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: OLIVEIRA, FLAVIO S
Address: 5352 PEPPER BRUSH CV
City-St-Zip: APOPKA, FL 32703 US

Title: V ( ) Delete
Name: OLIVEIRA, MAURICIO S
Address: SHISQI 16 CONJ 2 CASA 3, LAGO SUL
City-St-Zip: BRAZILIA, DF 70363 BR

Title: T ( ) Delete
Name: OLIVEIRA, CIRO S
Address: SHISQI 16 CONJ 2 CASA 3, LAGO SUL
City-St-Zip: BRAZILIA, DF 70363 BR

Title: S ( ) Delete
Name: OLIVEIRA, ROQUE S
Address: SHISQI 16 CONJ 2 CASA 3, LAGO SUL
City-St-Zip: BRAZILIA, DF 70363 BR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: OLIVEIRA, FLAVIO S
Address: 1516 E COLONIAL DR SUITE 107
City-St-Zip: ORLANDO, FL 32803 US

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 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: FLAVIO OLIVEIRA PR 03/22/2007

Electronic Signature of Signing Officer or Director — Date