

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000142063

**FILED**  
**Oct 29, 2009**  
**Secretary of State**

**Entity Name:** SHIRA'S TRACTOR & TRUCK SERVICE, INC.

**Current Principal Place of Business:**

5110 SR 70 WEST  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

5111 SR 70 WEST  
LAKE PLACID, FL 33852

**Current Mailing Address:**

P.O.BOX 1462  
LAKE PLACID, FL 33862

**New Mailing Address:**

**FEI Number:** 55-0853896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LYBARGER, BRUCE  
226 SOUTH RIDGEWOOD DRIVE  
SEBRING, FL 33870 US

**Name and Address of New Registered Agent:**

SHIRA, TINA M  
5111 SR 70 WEST  
LAKE PLACID, FL 33852 US

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: TINA M SHIRA

10/29/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHIRA, EVAN B  
Address: P.O.BOX 1462  
City-St-Zip: LAKE PLACID, FL 33862

Title: ST ( ) Delete  
Name: SHIRA, TINA M  
Address: P.O.BOX 1462  
City-St-Zip: LAKE PLACID, FL 33862

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: TINA M SHIRA

ST

10/29/2009

Electronic Signature of Signing Officer or Director

Date