


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P04000128486</b> 1. Entity Name KEY LARGO AUTO & TIRE, INC.																											
Principal Place of Business 104505 OVERSEAS HWY / PO BOX 133 KEY LARGO, FL 33037		Mailing Address 104505 OVERSEAS HWY / PO BOX 133 KEY LARGO, FL 33037																									
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 104505 O.S. Hwy. Suite, Apt. #, etc.																									
City & State Key Largo, FL		City & State Key Largo, FL																									
Zip 33037	Country	Zip 33037	Country																								
6. Name and Address of Current Registered Agent A1A REGISTERED AGENT INC. 92 SADBERRY RD QUINCY, FL 32351		7. Name and Address of New Registered Agent Name: Robert Gould Street Address (P.O. Box Number is Not Acceptable): 104505 O.S. Hwy. City: Key Largo FL Zip Code: 33037																									
8. 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. SIGNATURE: <i>[Signature]</i> DATE: 10-10-05 <small>Signature typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)</small>																											
<b>FILE NOW!!! FEE IS \$750.00</b> <b>After January 1, 2006, Fee will be \$900.00</b>																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">PV</td> <td style="width:10%;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>GOULD, ROBERT F</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>104505 OVERSEAS HWY / PO BOX 133</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>KEY LARGO, FL 33037</td> <td></td> </tr> </table>		TITLE	PV	<input type="checkbox"/> Delete	NAME	GOULD, ROBERT F		STREET ADDRESS	104505 OVERSEAS HWY / PO BOX 133		CITY-ST-ZIP	KEY LARGO, FL 33037		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">Gould, Robert F.</td> <td style="width:10%;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>104505 Overseas Hwy.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>Key Largo, FL. 33037</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	Gould, Robert F.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	104505 Overseas Hwy.		STREET ADDRESS	Key Largo, FL. 33037		CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE: 10-10-05 DAYTIME PHONE: 305-451-2277																									

FILED

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TALLAHASSEE, FLORIDA



REINSTATEMENT 2005