

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 20, 2007 8:00 am**  
**Secretary of State**

06-20-2007 90001 021 \*\*\*150.00

**DOCUMENT # P04000144285**

1. Entity Name  
ANY TIME TIRE, INC.



Principal Place of Business  
6020 NE 3RD TERRACE  
FORT LAUDERDALE, FL 33334

Mailing Address  
6020 NE 3RD TERRACE  
FORT LAUDERDALE, FL 33334

40121180



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06082007

Chg-P

CR2E034 (12/06)

4. FEI Number  
86-1118307

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOOKER, MARSHALL  
6020 NE 3RD TERRACE  
FORT LAUDERDALE, FL 33334

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME BOOKER, MARSHALL  
STREET ADDRESS 6020 NE 3RD TERRACE  
CITY - ST - ZIP FORT LAUDERDALE, FL 33334

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
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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 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: Marshall Booker Marshall Booker 6/14/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

4012118.0

May 4, 2007.

Any Time Tire Inc.  
6020 North East 3<sup>rd</sup> Terrace.  
Fort Lauderdale.  
Florida.

Doc # P04000144285.

Division of Corporations.  
P.O. Box 6198.  
Tallahassee, Florida 32314.

**Reference; Failed on line Electronic Filing.**

Dear Sir/ Madame,

I attempted to Electronically file my Annual Report on April 30<sup>th</sup> 2007. For some reason the payment was not accepted. I was informed by a representative from your division that there were website problems on that day and that I should download the form and send it in with my payment and a copy of the confirm billing information and an explanation of what happened. Thank you for your consideration.

Yours Respectfully.

Marshall Booker.

*Marshall Booker*