2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2008 08:00 AN Secretary of State

Daytime Phone #

| | | Apr 23, 2000 00:00 |
|--|--|---|
| DOCUMENT # P05000083511 1. Entity Name TIREXCHANGE, INC MIAMI | | Secretary of Star |
| Principal Place of Business 11350 NW 25TH STREET SUITE 104 MIAMI, FL 33172 Mailing Address 11350 NW 25TH STREET SUITE 104 MIAMI, FL 33172 MIAMI, FL 33172 | | THE REPORT OF THE PROPERTY OF |
| DO NOT WRITE IN THIS SPA | VCE · | 04262008 No Chg-P CR2E034 (11/05) 4. FEI Number 20-2978811. Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| GAROFOLO, RALPH 11350 NW 25TH STREET SUITE 104 MIAMI, FL 33172 | | DO NOT WRITE IN THIS SPACE |
| 8. The above named entity submits this state both to the purpose of phanging its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of positive agent. SIGNATURE ——————————————————————————————————— | | |
| FILE NOW!!! FFE IS \$150.00 After May 1, 2008 fee will be \$550.00 9. Election Campaign Fin Trust Fund Contribution | | .00 May Be ed to Fees |
| 10. OFFICERS AND DIRECTORS TITLE D NAME GAROLOLO, RALPH STREET ADDRESS 15485 N. 84TH STREET CITY-ST-ZIP SCOTTSDALE, AZ 85260 TITLE NAME | | .U00000931792 05/22/08-80029-010 150.00 |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | DO NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-S1-ZIP | 1 | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the eindicated on this report or supplemental report is true and accorate and that my sign of the corporation or the receiver outrustee emporated by execute this report as | exemptions contained that is shall have the s red by Chapter 607 | I in Chapter 119, Florida Statutes. I further certify that the information same legal effect as if made under outh; that I appear officer or director , Florida Statutes; and that my name appear to Block 10 or Block 11 if |

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING SPECER OR DIRECTOR

SIGNATURE: