

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133099

FILED
Apr 27, 2006
Secretary of State

Entity Name: SOLID VALUE TIRE SERVICE ,INC.

Current Principal Place of Business:

1801 N. MILITARY TRAIL
SUITE 203
BOCA RATON, FL 33431

New Principal Place of Business:

2855 S CONGRESS AVE
BAY F
DELRAY BEACH, FL 33445

Current Mailing Address:

1801 N. MILITARY TRAIL
SUITE 203
BOCA RATON, FL 33431

New Mailing Address:

2855 S CONGRESS AVE
BAY F
DELRAY BEACH, FL 33445

FEI Number: 20-3548063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINZ, BRIAN
1801 N. MILITARY TRAIL,
SUITE 203
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

FINZ, BRIAN
2855 S CONGRESS AVE
BAY F
DELRAY BEACH, FL 33445 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: _____

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: FINZ, BRIAN
Address: 1801 N. MILITARY TRAIL, SUITE 203
City-St-Zip: BOCA RATON, FL 33431

Title: VSTD () Delete
Name: MCINNES, ROBERT
Address: 1801 N. MILITARY TRAIL, SUITE 203
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change () Addition
Name: FINZ, BRIAN
Address: 2855 S CONGRESS AVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: VSTD (X) Change () Addition
Name: MCINNES, ROBERT
Address: 2855 S CONGRESS AVE
City-St-Zip: DELRAY BEACH, FL 33445

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: BRIAN FINZ

PD

04/27/2006

Electronic Signature of Signing Officer or Director

Date