

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000019606

FILED  
Feb 27, 2009  
Secretary of State

Entity Name: HIGHWAY TIRE CORPORATION

**Current Principal Place of Business:**

9710 NW 115TH WAY #4  
MEDLEY, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

9710 NW 115TH WAY #4  
MEDLEY, FL 33178

**New Mailing Address:**

FEI Number: 20-4308693

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CANNALUNGA, MARIO  
9710 NW 115TH WAY #4  
MEDLEY, FL 33178 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: CANNALUNGA, MARIO  
Address: 9710 NW 115TH WAY #4  
City-St-Zip: MEDLEY, FL 33178

Title: DT ( ) Delete  
Name: DE CASTRO, CELIO  
Address: 9710 NW 115TH WAY #4  
City-St-Zip: MEDLEY, FL 33178

Title: DS ( ) Delete  
Name: CUADRATRO, BERNARDO  
Address: 9710 NW 115TH WAY #4  
City-St-Zip: MEDLEY, FL 33178

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: CUADRA, BERNARDO  
Address: 9710 NW 115TH WAY #4  
City-St-Zip: MEDLEY, FL 33178

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: MARIO CANNALUNGA

DP

02/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date