

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000093861

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** TIRE MASTERS AUTO CARE & BRAKE, INC.

**Current Principal Place of Business:**

2180 CRAWFORDVILLE HWY  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

**Current Mailing Address:**

2620 S. MONROE ST.  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 20-5189966

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, BRYAN  
2620 S. MONROE ST.  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PHILLIPS, BRYAN  
Address: 3204 KATHERINE SPEED CT  
City-St-Zip: TALLAHASSEE, FL 32303 US

I hereby 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 all other like empowered.

SIGNATURE: BRYAN PHILLIPS

PRES

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date