

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000072289

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** P AND M MOBILE TIRE SERVICE INC.

**Current Principal Place of Business:**

5639 DAWSON ST  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

2518 NW 73AVE  
SUNRISE, FL 33313

**New Mailing Address:**

2518 NW 73RD AVE  
SUNRISE, FL 33313

**FEI Number:** 27-3412282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAMPBELL, PAUL  
2518 NW 73AVE  
SUNRISE, FL 33313 US

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

CAMPBELL, PAUL  
2518 NW 73RD AVE  
SUNRISE, FL 33313 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/20/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CAMPBELL, MARSHA  
**Address:** 2518 NW 73RD AVE  
**City-St-Zip:** SUNRISE, FL 33313

**Title:** VP  
**Name:** CAMPBELL, PAUL  
**Address:** 2518 NW 73RD AVE  
**City-St-Zip:** SUNRISE, FL 33313

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:** MARSHA CAMPBELL

P

04/20/2011

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

\_\_\_\_\_  
Date