

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000031821

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** WOLF PAC TIRE PLUS INC.

**Current Principal Place of Business:**

1865 S.W 4TH AVE  
BAY 7 D  
DELRAY BCH, FL 33444

**New Principal Place of Business:**

725 SW 16TH AVENUE  
UNIT 4  
DELRAY BCH, FL 33444

**Current Mailing Address:**

2201 S.E 3RD ST  
APT A  
BOYNTON BCH, FL 33435

**New Mailing Address:**

725 SW 16TH AVENUE  
UNIT 4  
DELRAY BCH, FL 33444

**FEI Number:** 80-0701861

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OXYDE, MARIE L  
5790 ITHACA CIR E  
LAKE WORTH, FL 33463 US

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

OXYDE, MARIE L  
2425 2ND AVENUE NORTH  
LAKE WORTH, FL 33461 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: OXYDE, MARIE L  
Address: 2425 2ND AVENUE NORTH  
City-St-Zip: LAKE WORTH, FL 33461

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: MARIE L. OXYDE

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date