

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P11000106734

**Entity Name:** SAM'S TIRES INC

**FILED**  
**Apr 10, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

860 NORTH EDGEWOOD AVE  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

**Current Mailing Address:**

860 NORTH EDGEWOOD AVE  
JACKSONVILLE, FL 32254

**New Mailing Address:**

**FEI Number:** 27-0831924

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAWAR, SAMAN  
860 NORTH EDGEWOOD AVE  
JACKSONVILLE, FL 3554 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:** SAMAN KAWAR

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** KAWAR, SAMAN  
**Address:** 860 NORTH EDGEWOOD AVE  
**City-St-Zip:** JACKSONVILLE, FL 32254

**Title:** VP  
**Name:** HANANNIA, SAMEER  
**Address:** 860 NORTH EDGEWOOD AVE  
**City-St-Zip:** JACKSONVILLE, FL 32254

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:** SAMAN KAWAR

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

PRES

04/10/2013

\_\_\_\_\_  
Date