

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000066900

**FILED**  
**Feb 13, 2014**  
**Secretary of State**

**Entity Name:** VARGAS TIRE SUPER CENTER INC.

**Current Principal Place of Business:**

9590 NW 32 PLACE  
MIAMI, FL 33147

**New Principal Place of Business:**

2995 NW 79ST  
MIAMI, FL 33147

**Current Mailing Address:**

9590 NW 32 PLACE  
MIAMI, FL 33147

**New Mailing Address:**

**FEI Number:** 46-0723605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VARGAS-BONILLA, MICHAEL A  
9590 NW 32 PLACE  
MIAMI, FL 33147 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:** MICHAEL A VARGAS

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** VARGAS, JOSE L  
**Address:** 9590 NW 32 PLACE  
**City-St-Zip:** MIAMI, FL 33147

**Title:** D  
**Name:** BONILLA, DEISY C  
**Address:** 9590 NW 32 PLACE  
**City-St-Zip:** MIAMI, FL 33147

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:** MICHAEL A VARGAS

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

MR

02/13/2014

\_\_\_\_\_  
Date