

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000069262

FILED
Nov 08, 2007
Secretary of State

Entity Name: MICHIGAN TIRES DISTRIBUTORS CORPORATION

Current Principal Place of Business:

516 E. OSCEOLA PKWY
KISSIMMEE, FL 34744 US

New Principal Place of Business:

516 E OSCEOLA PKWY.
KISSIMMEE, FL 34744 US

Current Mailing Address:

516 E. OSCEOLA PKWY
KISSIMMEE, FL 34744 US

New Mailing Address:

3919 COASTAL BREEZE DR.
KISSIMMEE, FL 34744 US

FEI Number: 59-3399226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDONA, ALEXANDER
4006 BEAU RIVAGE CT
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

CARDONA, ALEXANDER P
3919 COASTAL BREEZE DR
KISSIMMEE, FL 34744 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: ALEXANDER CARDONA

11/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARDONA, ALEXANDER
Address: 4006 BEAU RIVAGE CT
City-St-Zip: KISSIMMEE, FL 34746

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARDONA, ALEXANDER
Address: 3919 COASTAL BREEZE DR.
City-St-Zip: KISSIMMEE, FL 34744

Title: VP () Change (X) Addition
Name: CARDONA, MIRTA D VP
Address: 3919 COASTAL BREEZE DR
City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALEXANDER CARDONA

P

11/08/2007

Electronic Signature of Signing Officer or Director

Date