2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P97000036694

Entity Name: PRO FIX MUFFLER & BRAKE CENTER, INC.

Current Principal Place of Business:

3053 N CARL G ROSE HWY
HERNANDO, FL 34442

New Principal Place of Business:

Current Mailing Address:

4842 E. STOER LANE
FLORAL CITY, FL 34436

New Mailing Address:

3053 N. CARL G. ROSE HWY
HERNANDO, FL 34442

FEI Number: 59-3444840 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERMAN, BRENDA L
4842 E STOER LANE
FLORAL CITY, FL 34436 US

Name and Address of New Registered Agent:

HERMAN, BRENDA L
3053 N. CARL G. ROSE HWY
HERNANDO, FL 34442 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: _____ 04/15/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: HERMAN, BRENDA
Address: 4842 E STOER LANE
City-St-Zip: FLORAL CITY, FL 34436

Title: VP ( ) Delete
Name: RIEMER, PETER
Address: 4842 E. STOER LN.
City-St-Zip: FLORAL CITY, FL 34436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HERMAN, BRENDA
Address: 3053 N. CARL G. ROSE HWY
City-St-Zip: HERNANDO, FL 34442

Title: VP (X) Change ( ) Addition
Name: RIEMER, PETER OWNER
Address: 3053 N. CARL G ROSE HWY
City-St-Zip: HERNANDO, FL 34442

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: PETER RIEMER VP 04/15/2009
Electronic Signature of Signing Officer or Director — Date