PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED May 08, 1999 8:00 am Secretary of State

| 1 | 1999 | DIVISION OF CO | of State RPORATIONS | 03-08-1999 90 | 0002 046 ***150.00 | |
|---|--|--|---|--|---|--|
| 1. Corporation | MENT # P98000 D Name ED TIRES, INC. | 0046872 ~ | | | | |
| Principal Place | of Business | Mailing Address | | T (SEETERAL OF OFFICE FACTOR AND AND AREA OF | iti difin die 2. zwin idten eine iene | |
| 3675 PEMBROK HOLLYWOOD F | E ROAD | 3675 PEMBROKE ROAD HOLLYWOOD FL 33021 | | DO NOT WRITE IN TH | HS SPACE | |
| | | | | 3. Date Incorporated or Qualified 05/26/1998 | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | 65-083838Z | Applied For Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| - City & State | | City & State | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip - | Country | Zip30 | Country | This corporation owes the current year Personal Property Tax. | Intangible No No | |
| A | 9. Name and Address of Currer | | | 10. Name and Address of New Registers | d Agent | |
| | - | • | 81 Name | | • | |
| | F, SHAWN | | 82 Street Add | Iress (P.O. Box Number is Not Acceptable) | | |
| | PEMBROKE ROAD | | | 62 6366 7, 636 86 (11.5) | | |
| HUL | LYWOOD FL 33021 | | 83 | | } | |
| 1 | | | 84 City | | 85 Zip Code | |
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| | | | | the ship waste and for the surross | of changing its registered | |
| 11. Pursuant office or r | to the provisions of Sections 607.050 egistered agent, or both, in the State | 02 and 607.1508, Florida Statutes, of Florida. Such change was auth | the above-named corporati | poration submits this statement for the purpose ion's board of directors. I hereby accept the app | of changing its registered cointment as registered | |
| Į. | to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the obliga | 02 and 607.1508, Florida Statutes, of Florida. Such change was authations of, Section 607.0505, Florida | the above-named corporationized by the corporation Statutes. | poration submits this statement for the purpose ion's board of directors. I hereby accept the app | of changing its registered pointment as registered | |
| SIGNATURE | to the provisions of Sections 607.056 egistered agent, or both, in the State or familiar with, and accept the obligation storeture, typed or printed name of registered age | | the above-named corporation or statutes. | ed when rematating) DATE | of changing its registered pointment as registered | |
| SIGNATURE | Signature, typed or printed name of registered age | ant and title if applicable (NOTE: Re | | | of changing its registered pointment as registered | |
| SIGNATURE | Signature, typed or printed name of registered age OFFICERS AN | ent and title if applicable (NOTE: Fle | gistered Agent eigneture require 13. | ed when rematating) DATE | of changing its registered pointment as registered | |
| SIGNATURE 12. TITLE NAME | Signeture, typed or printed name of registered age OFFICERS AN PD. POFF, SHAWN | ant and title if applicable (NOTE: Re | 13. 1.1 TITLE 12 NAME | ed when rematating) DATE | of changing its registered pointment as registered | |
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed promain attachment with an address, with ell other like empowered.