

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000018097

FILED
Apr 22, 2003
Secretary of State

Entity Name: A K TIRES USA, INC.

Current Principal Place of Business:

5019 WEST NASSAU STREET
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

5019 WEST NASSAU STREET
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3586538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRATZIK, HOLGER
5019 WEST NASSAU STREET
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

FILIPPELLO, MICHAEL L
3011 W SAN MIGUEL ST
TAMPA, FL 33629 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: MICHAEL L FILIPPELLO

04/22/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KRATZIK, HOLGER
Address: 5019 WEST NASSAU STREET
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: FILIPPELLO, MICHAEL L
Address: 5011 W SAN MIGUEL STREET
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL L FILIPPELLO

D

04/22/2003

Electronic Signature of Signing Officer or Director

Date