

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 31 AM 11:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000020422

1. Corporation Name

TIRE & WHEEL CITY, INC.

Principal Place of Business

2348 W COLUMBUS DRIVE  
TAMPA FL 33607

Mailing Address

2348 W COLUMBUS DRIVE  
TAMPA FL 33607

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

N/A

3. New Mailing Office Address, If Applicable

N/A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 03

4. Date Incorporated or Qualified  
To Do Business in Florida

03/01/1999

5. FEI Number

59-3363220

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	RAMIREZ, MIQUEL	<del>3210 W COLUMBUS DRIVE</del> 2348 W COLUMBUS DR.	TAMPA FL 33607

900024329479  
10/31/03--01026--011 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RAMIREZ, MIQUEL

3210 W COLUMBUS DRIVE  
TAMPA FL 33607

Name

Street Address (P.O. Box Number is Not Acceptable)

2348 W COLUMBUS DRIVE

Suite, Apt. #, Etc.

TAMPA FLA

City

State

Zip Code

FL

33607

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

10/24/03

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i); F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/24/03 813-2513594

CFR2ED40 (8/02)

Goodyear • Dunlop • Nitto • Michelin • BF Goodrich

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10-03

To: Division of Corporations  
Annual Report/Reinstatement Section

As discussed over the phone,  
enclosed is the \$150.00 check  
for reinstatement of application.  
Also a filled and signed application.

We did not know that we were supposed  
to file anything, before today.  
When our new office secretary called  
to verify the status of our corporation,

Miguel Ramirez