

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 99 0000 32005

ALL STAR TIRE AND AUTOMOTIVE CENTER, INC,

304 W Hwy 90

SAME

BONIFAY, FL

SAME

Country

Country

GARY DARLING

304 W HWY 90

City

BONIFAY

State

FL

Zip Code

32425

Registered Agent

REGISTERED AGENT MUST SIGN

Date _____

Titles

Name of Officers and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

D

GARY DARLING

304 W Hwy 90

BONIFAY, FL 32925

p

FAR, DARLING

304 W HWy 90

BONIFAY, FL 32425

57

PAMELA DARLING

304 in Hwy 90

BONIFAY FL 32425

REINSTATEMENT

2010-11

10. **E-mail Address:**

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

8105472072

Daytime Phone #