

State of California Secretary of State



in the office of the Secretary of State of the State of California

APR 0 6 2009

STATEMENT OF INFORMATION

(Domestic Stock and Agricultural Cooperative Corporations) FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.

DEAD INSTRUCTIONS RECORD COMPLETING THIS FORM

	T READ INSTRUCTIONS BEFORE COMPLE	TING THIS FURM	Inis Space Fo	r Filing Use Only
1. CORPORATE	NAME (Please do not alter if name is preprinted.)			S
C1712731				
JIM'S TIRE CENTER SIMI VALLEY, INC.				
DUE DATE:				
COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 2 and 3 cannot be P.O. Boxes.)				
2. STREET ADDRE	SS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
1525 East Los Ar	igeles Avenue	Simi Valley	CA	93065
3. STREET ADDRE	SS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
1525 East Los Ar	geles Avenue	Simi Valley	_ CA	93065
4 MAILING ADDRE	SS OF THE CORPORATION, IF DIFFERENT THAN ITEM 2	CITY	STATE	ZIP CODE
NAMES AND COMPLETE ADDRESSES OF THE FOLLOWING OFFICERS (The corporation must have these three officers. A comparable title				
	er may be added, however, the preprinted titles on this form			
5 CHIEF EXECUTIV		CITY	STATE	ZIP CODE
James Farpelha	1525 East Los Angeles Avenue	Simi Valley	CA	93065
6 SECRETARY/	ADDRESS	CITY	STATE	ZIP CODE
Barbara Farpelha			CA	93065
7. CHIEF FINANCIA		CITY	STATE	ZIP CODE
Barbara Farpelha		Simi Valley	CA	93065
NAMES AND COMPLETE ADDRESSES OF ALL DIRECTORS, INCLUDING DIRECTORS WHO ARE ALSO OFFICERS (The corporation must have at least one girector. Attach additional pages, if necessary.)				
8 NAME	ADDRESS	CITY	STATE	ZIP CODE
James Farpelha	1525 East Los Angeles Avenue		CA	93065
9. NAME	ADDRESS	CITY	STATE	ZIP CODE
Barbara Farpelha	1525 East Los Angeles Avenue	Simi Valley	CA	93065
10. NAME	ADDRESS	CITY	STATE	ZIP CODE
				· '
11 NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:				
AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California				
street address (a P.O. Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a				
	to Corporations Code section 1505 and Item 13 must be le	ft blank.)		
12 NAME OF AGENT FOR SERVICE OF PROCESS				
James Farpelha 13 STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE				
1525 East Los A			STATE	ZIP CODE 93065
		Simi Valley	CA	93005
TYPE OF BUSINESS				
14. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION retail sale of tires and automotive repair services				
15 BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.				
			//	101/11
2/04/2009	Barbara Farpelha	Secretary	(, <i>i)</i>)	4///
DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	N / V SIGNA	
SI-200 C (REV 01/2008) APPROVED BY SECRETARY OF STATE				