2003 FOR PROFIT CORPORATION

Apr 16, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** 540240 DOCUMENT # BEACH TOWING SERVICES, INC. Principal Place of Business Mailing Address 1349 DADE BOULEVARD 1349 DADE BOULEVARD MIAMI BEACH FL 33139-1420 MIAMI BEACH FL 33139-1420 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-1992995 Not Applicable Zip Country ~Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **ROSEN & SWITKES P.A.** Street Address (P.O. Box Number is Not Acceptable) 407 LINCOLN ROAD PENTHOUSE SUITE MIAMI BEACH FL 33139 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE · Signature, typed or printed name of reachered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/02) TITLE ☐ Delete TITLE Change Addition FESTA, VINCENT J NAME NAME 1349 DADE BLVD STREET ADDRESS STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP CITY-ST-ZIP PD TITLE ☐ Delete TITLE Change Addition FESTA, MARK NAME NAME 1349 DADE BLVD STREET ADDRESS STREET ADDRESS MIAMI BEACH FL--CITY-ST-ZIP-CITY-ST-ZIP ☐ Delete **AVP** TITI F TITLE ☐ Change ☐ Addition MARTINEZ, GEORGE NAME NAME 1349 DADE BLVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP AT ☐ Delete Change TITLE TITLE ☐ Addition RODRIGUEZ, JOSE NAME NAME 1349 DADE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP **D**elete DT) F TITLE Change ☐ Addition RINERIO, ANDONIO J NAME NAME STREET ADDRESS 1349 DADE BLVD STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director the execute his report as required by Chapter 607, Florida Statules; and that my name appears in Block 10 or Block 11 if indicated on this report or supplement of the corporation or the receiver stee empow changed, or on an attachment SIGNATURE:

12. I hereby certify that the information supplied with this

tal report is tru