

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2003 8:00 am**  
**Secretary of State**

05-16-2003 90186 021 \*\*\*150.00

**DOCUMENT # P98000036939**

1. Entity Name  
**JONAS TOWING, INC.**



Principal Place of Business  
115 SW 34TH AVENUE  
DEERFIELD BEACH, FL 33442

Mailing Address  
115 SW 34TH AVENUE  
DEERFIELD BEACH, FL 33442

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0831321**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YEEND, JOHN M**  
1109 SOUTH CONGRESS AVENUE  
WEST PALM BEACH, FL 33406

Name **CAPITAL SERVICES GROUP**

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

**822 SE 9TH ST**

**ARM PLAZA**

City **DEERFIELD BEACH**

**FL**

Zip Code  
**33441**

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 Registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**05/13/03**

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME **PDS**  
STREET ADDRESS **DE OLIVEIRA, JONAS**  
CITY-ST-ZIP **115 SW 34TH AVENUE  
DEERFIELD BEACH, FL 33442** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**05/13/03**

Date

**954 427 4770**

Daytime Phone #

CR2E034 (10/02)

Attachment

90135820

# P98000036939

**JONAS TOWING, INC.**

115 SW 34<sup>th</sup> AVE - DEERFIELD BEACH, FL 33442-2364

05/13/03

FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood - Secretary of State  
DIVISION OF CORPORATIONS  
P.O. BOX 1500  
Tallahassee, FL 32302-1500

Dear Mr. Glenda E. Hood;

I did NOT receive the UBR notice to file the 2003 fees.

Attached please find a copy of the UBR that we downloaded from the web site plus a check for \$150.00 for the annual fee. I am just following the instructions I received from your customer service today.

If you have any question please feel free to contact us.

I am hereby requesting that you REINSTATE my company as soon as possible.

Sincerely;



Jonas de Oliveira  
President