

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000100765

Entity Name: ALL PRO TOW LLC

Current Principal Place of Business:

1207 N. 19TH ST
TAMPA, FL 33605

Current Mailing Address:

1207 N. 19TH ST
TAMPA, FL 33605 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STAM, KRISTINA L
1207 N. 19TH ST
TAMPA, FL 33605 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	HAMILTON , CHRISTOPHER	Name	STAM, KRISTINA
Address	1207 N. 19TH ST	Address	1207 N. 19TH ST
City-State-Zip:	TAMPA FL 33605	City-State-Zip:	TAMPA FL 33605
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	HAMILTON , CHRISTOPHER	Name	STAM, KRISTINA
Address	1207 N. 19TH ST	Address	1207 N. 19TH ST
City-State-Zip:	TAMPA FL 33605	City-State-Zip:	TAMPA FL 33605

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTINA STAM

OWNER

04/29/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date