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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 585405 1. Corporation Name

FESTA TOWING SERVICE, INC.

Principal Place of Business Mailing Address										
220 S. DIXIE HIGHWAY 220 S. DIXIE HIGHWAY							•		·	
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020							DO NOT WRITE IN THIS SPACE			
us us							3. Date Incorporated or Qualifed			
							09/06/1978			ĺ
2 Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number		A	pplied For
21	acc of Boomogo	├	26				59-1849816			lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	_ 						\$8.75	Additional
22		27	27				5. Certifcate of Status Desired		Fee R	Required
City & State	e	City & State	City & State			Ì	6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Zip		intry			8. This corporation owes the curr	ent year Inta		_
24	25	29	30				Personal Property Tax.		∐ Yes	□No
	9. Name and Address of Curr	ent Registered Agent					10. Name and Address of New I	Registered A	Agent	
TODI	N ADTUUD			81	Name					
tobin, arthur 220 S. Dixie Hwy.				82	82 Street Address (P.O. Box Number is Not Acceptable)					
	S. DIAIE HWT. LYWOOD FL 33020									
noti	L1WOOD FL 33020			83	-					
				84	City				85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,								<u>FL</u>	<u> </u>	
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the Stat	502 and 607.1508, Florida Sta te of Florida, Such change wa	atutes, the a	ibove d hv	e-named the coro	corpora	ation submits this statement for the 's board of directors. I hereby acce	purpose of o ot the appoir	cnanging it ntment as r	egistered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Stat	lutes			• • • • • • • • • • • • • • • • • • •			
SIGNATURE										
	Signature, typed or printed name of registered a		IOTE: Registered	Agen	t signature	required wi	rhen reinstating) ADDITIONS/CHANGES TO OF	DATE	D DIRECT	OPC IN 12
12.	P OFFICERS A	AND DIRECTORS DELETE	13.	m c			ADDITIONS/CHANGES TO OF	FICERS AN	Change	
TITLE	•	☐ DELL! L								
NAME	TOBIN, ARTHUR		1.2 N							
STREET ADDRESS	220 S DIXIE HWY			1.3 STREET ADDRESS						Į.
CITY-ST-ZIP	HOLLYWOOD FL 33020	DELETE		1.4 CiTY-ST-ZIP		-			[] Change	Addition
TITLE				2.1 TITLE		1				
NAME			2.2 N							}
STREET ADDRESS					TADDRESS					
CITY-ST-ZIP		☐ OELETE		CITY-S	T-ZP	+			Change	Addition
TITLE							-			
NAME			3.2 N							ł
STREET ADDRESS					ADDRESS					j
CITY-ST-ZIP		☐ DELETE		TTY-S	11-ZIP	+			Change	Addition
TITLE			4.11							
NAME					TADDRESS					
STREET ADDRESS										
CITY-ST-ZIP		☐ DELETE		ITY-S	t-ZIP	 		-	Change	Addition
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NAME					TADDRESS					ſ
STREET ADDRESS			•	HY-S						İ
CITY-ST-ZiP		☐ DELETE				 	····		Change	Addition
TITLE		باعداد ب	6.2 N							_ " "
NAME					TADDRESS	1				}

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or gh an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP