FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F11972

(9)

EL TRIUNFO CORP. TOWING SERVICES

FILED
Jan 21 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address											. I	91811 91811 1881
7536 WEST 5TH LANE				7536 WEST 5TH LANE								
HIALEAH F	HIALEAH FL 33014											
									DO NOT WRITE	IN THIS	SPACE	
									3. Date Incorporated or Qualified 01/16/1981			
2. Principal I	Place of Busi	ness	28	2a. Mailing Address					4. FEI Number		- A	pplied For
21			26						59-1588135		N	lot Applicable
Suite, Apt	. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional
22			27	27								ledniteq
City & Sta	le		28	City & State					6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country			Zip Co.				8. This corporation owes or has paid the current year Intan				
24	25		29	29 30					Personal Property Tax due June			XI No
	9. Name	and Address of Cur	ent Regis	stered Agent					10, Name and Address of New Re	gistered	Agent	
	DIAZ, CARL					81	Name					
7516 W 5 LANE HIALEAH FL 33012						82	Street	Addres	ss (P.O. Box Number is Not Acceptat			
Г	TIMUENT FL	. 33012				83						
						Щ						
						84	City			FL	85 Zip	Code
11. Pursuant	to the provis	ions of Sections 607.0	502 and 6	607.1508, Florida Sta	itutes, the	above	named	corpo	ration submits this statement for the p n's board of directors. I hereby accep	ourpose o	of changing I	ts registered
agent. I a	am familiar w	th, and accept the ob	ligations o	f, Section 607.0505,	Florida S	Statutes		JOHERO	in a board of directors. Thereby accep	n ine app	JOHNINGIN ES	registered
SIGNATURE												
	Signature, typed	or printed name of registered					nt signature	required	when reinstating)	DATE	D DIDEOTO!	00 11 10
12.	PDT	OFFICERS A	IND DIREC	DELETE	_	3. 1 TITLE		l	ADDITIONS/CHANGES TO OFFIC	JERS ANI	Change	Addition
NAME		CARLOS A. JR.				2 NAME					Onlinge	Nativilian
STREET ADDRESS 7516 W 5 LANE				i i			ADDRESS					
	CHY-ST-ZIP HIALEAH FL											
TITLE	\$D			DELETE		4 CITY-S' 1 TITLE	1-211				Change	Addition
NAME	DIAZ,	AIDA		_		2 NAME					5-	
STREET ADDRESS		WEST 5TH LANE				3 STREET	ADDRESS					
CITY-ST-ZIP	HIALE				2.	4 CITY - S	T-ZIP					
TITLE	-			☐ DELETE		1 TITLE					Change	Addition
NAME					33	2 NAME						
STREET ADDRESS					33	3 STREET	ADDRESS					
CITY-ST-ZIP	<u></u>				3.4	4. CITY-S	T - Z (P					
TITLE				☐ DELET E	4.1	1 TITLE					Change	Addition
NAME					4.	2 NAME						
STREET ADDRESS					4.3	3 STREET.	ADDRESS					'
CITY-ST-ZIP	ļ				4.4	4 CITY - ST	- ZIP					
TITLE				DELETE		1 TITLE					☐ Change	☐ Addition
NAME						2 NAME						
STREET ADDRESS						3 STREET						
CITY-ST-ZIP	 -			DECETE		4 CITY - ST	- ZIP					A 4-01:-
TITLE				☐ DELETE		1 TITLE					L Change	L. Addition ☐
NAME ATTECT ADDRESS	1					2 NAME						
STREET ADDRESS						3 STREET						
CITY-ST-ZIP	acrife that th	a information according	ration thin C	the deep not a self-	64	1 CITY - ST	- ZIP	-1 :- C-	estion 110.07(2)(i) Elevido Statuton I	1		1.4

14. Thereby 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 eath; 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 on an attachment with an address.

SIGNATURE: X Color & Color

1-13-98 18-4399

CR2E034 (10/97