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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 21, 1999 8:00am

**Secretary of State** 

01-21-1999 90059 027 \*\*\*150.00

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT #** K80908 1. Corporation Name

ATLAS TOWING SERVICE, INC.									
						) ( <b>101</b>   121   101   101   101   101   101   101   101   101   101   101   101   101   101   101   101   101			
Principal Place of Business Mailing Address						* ************************************			
29927 SR 54 WEST 29927 SR 54 WEST				•		\$ 40	•	, ,	
WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543							DO NOT WRITE IN THIS SPACE		
		55				3. Date Incorporated or Qualifed	-, -,		
						04/18/1989		٠ .	
2. Principal Place of Business 2a. Mailing Address			ess			4. FEI Number	Ar	plied For	
21 26						59-2939695		ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			, etc.			5. Certificate of Status Desired		Additional	
22     27								equired	
23 28			•			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip				ountry	y	8. This corporation owes the current year			
24	25 29 30					Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Agent			,	10. Name and Address of New Register	ed Agent		
	IDINE DANIEL			81	Name				
YANDINE, DANIEL 5242 FOX HUNT DR				82 Street Add		ress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·		
WESLEY CHAPEL FL 33543				<u> </u>		A second			
WESLET CHAPEL PL 30043				83		· · · · · · · · · · · · · · · · · · ·			
	•			84	City		85 Zip	Code	
44 C Duranian	110 450						L	<u>:</u>	
office or	registered agent, or both, in the State of	of Florida. Such chan	ge was authoriz	ed by	the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	or changing its pointment as re	registered gistered	
	am familiar with, and accept the obligati	ions of, Section 607.	0505, Florida St	atutes	3.		1		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Register	ed Age	nt signature require	ed when reinstating) DATE			
12.	OFFICERS AND		13			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	PRS IN 12	
TITLE	P	□ DI	ELETE 1.1	TITLE		\$4.00\table 18.0Bit 1	☐ Change	Addition	
NAME	VANDINE, JOAN		1.2	NAME					
STREET ADDRESS			1.3	STREE	TADDRESS	•			
CITY-ST-ZIP	WESLEY CHAPEL FL			CITY-S	T-ZIP		ŧ		
TITLE	•	□ Di	LETE 2.1	TITLE		•	Change	☐ Addition	
NAME .	• .		2.2	NAME.					
STREET ADDRESS				TADDRESS					
CITY-ST-ZIP			CITY-5	ST-ZIP	711-77-744-1-4-1	П съ	T Addition		
TITLE	State Bridge			TITLE			Change	☐ Addition	
NAME STREET ADDRESS	性性 物油 注:	<i>&gt;</i> ₹		NAME					
CITY-ST-ZIP			-	TADDRESS	· · · · · · · · · · · · · · · · · · ·	DOMESTIC	13. 昭-昭		
TITLE									
				CITY-S	ST-ZIP	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	☐ Channe	Addition	
NAME	•	□ DE	LETE 4.1	TITLE	ST-ZIP		☐ Change	Addition	
NAME STREET ADDRESS		□ <b>D</b> £	LETE 4.1 4.2	TITLE NAME		- (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	☐ Change	Additión	
STREET ADDRESS		□ D£	LETE 4.1 4.2 4.3	TITLE NAME STREET	TADORESS	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Change	Addition	
			LETE 4.1 4.2 4.3 4.4	TITLE NAME	TADORESS	- 1. 3 (1. 1) からり (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Change	Addition Addition	
STREET ADDRESS CITY-ST-ZIP			LETE 4.1 4.2 4.3 4.4 LETE 5.1	TITLE NAME STREET	TADORESS				
STREET ADDRESS CITY-ST-ZIP TITLE			LETE 4.1 4.2 4.3 4.4 LETE 5.1 5.2	NAME STREET CITY-S TITLE NAME	TADORESS				

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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

Change

Addition