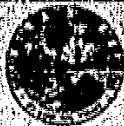


URGENT NOTICE: CORPORATION WILL BE SHUT DOWN BY 900 AFTER BUSINESS HOURS. REPORT MUST BE FILED BEFORE 5:00 PM. FEES OF INCORPORATION, CHANGE OF AGENT AND TAX TO BE PAID BY 5:00 PM.

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Dorinda B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 AUG -1 AM 10: 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02142 (2)

1. Corporation Name
BLUE JAY TOWING AND RECOVERY INC.

Principal Place of Business Mailing Address
C/O JAMES MILLER C/O JAMES MILLER
1221 S. 26TH AVE. 1221 S. 26TH AVE.
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/14/1989		3a. Date of Last Report 08/09/1994	
4. FEI Number 65-0129268		Applied For Not Applicable	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23		City & State 28	
Zip 24		Country 29	
Country 25		Country 30	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MILLER, JAMES 3300 PEMBROKE ROAD LOT 450 HOLLYWOOD FL 33021				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL		85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: James D. Miller **JAMES D. MILLER** **PRESIDENT** **JULY 28, 1995**
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, JAMES	12 NAME	
STREET ADDRESS	3300 PEMBROKE RD. #450	13 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	14 CITY - ST - ZIP	
TITLE	D	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, DEBORAH	22 NAME	
STREET ADDRESS	3300 PEMBROKE RD. #450	23 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	24 CITY - ST - ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE: James D. Miller **JAMES D. MILLER** **JULY 28, 1995** **(308) 921-6858**
(Signature and typed or printed name of signing officer or director) DATE Telephone Number

CR2E034 (3/95)