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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 13 AM 10:06

DOCUMENT # M46483 (7)

1. Corporation Name

MIDTOWN TOWING OF MIAMI, INC.

Principal Place of Business	Mailing Address
C/O HOWARD LICHTMAN 261 N.W. 79TH STREET MIAMI FL 33150	C/O HOWARD LICHTMAN 261 N.W. 79TH STREET MIAMI FL 33150

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/11/1987
3a. Date of Last Report: 01/20/1994

2. Principal Place of Business	2a. Mailing Address
21 551 N.W. 72 ST	26 551 N.W. 72 ST
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MIAMI FLORIDA	City & State 28 MIAMI FLORIDA
Zip 24 33150 Country 25	Zip 29 33150 Country 30

4. FEI Number: 59-2769797 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

LICHTMAN, HOWARD
261 N.W. 79TH STREET
MIAMI FL 33150

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 551 N.W. 72 ST
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

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	LICHTMAN, HOWARD
STREET ADDRESS	2255 NE 120 ST
CITY-ST-ZIP	NO MIAMI BEACH FL
TITLE	S
NAME	LICHTMAN, LAURAINE
STREET ADDRESS	2255 NE 120 STR
CITY-ST-ZIP	NO MIAMI BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP	NORTH MIAMI FL 33181	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP	NORTH MIAMI FL 33181	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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: Howard Lichtman Howard Lichtman 1/06/95 (305) 754-1450

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #