

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90083 028 ***150.00

DOCUMENT # M71079

1. Corporation Name

D & D TOWING AND RECOVERY INC.

Principal Place of Business

~~GLENN MICHAEL DEMPSEY~~
5108 INGRAHAM ST.
TAMPA FL 33681
US

Mailing Address

~~GLENN MICHAEL DEMPSEY~~
~~5108 INGRAHAM ST.~~
~~TAMPA FL 33681~~
~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1988

4. FEI Number

59-2890019

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 1301 N. CONGRESS AVE,

Suite, Apt. #, etc.

27 SUITE 330

City & State

28 BOYNTON BEACH, FL

Zip

29 33426

Country

30 US

9. Name and Address of Current Registered Agent

~~DEMPSEY, GLENN M.~~
5108 INGRAM STREET
TAMPA FL 33616

10. Name and Address of New Registered Agent

81 Name STEVEN B. TEETERS

82 Street Address (P.O. Box Number is Not Acceptable)

1301 N. CONGRESS AVE.

83 SUITE 330

84 City BOYNTON BEACH

FL

85 Zip Code 33426

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 Steven B. Teeters STEVEN B. TEETERS

DATE 4/27/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DP
NAME DEMPSEY, GLENN MICHAEL
STREET ADDRESS 5108 INGRAHAM STR
CITY-ST-ZIP TAMPA FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME EUGENE A. TARDECI
1.3 STREET ADDRESS 1301 N. CONGRESS AVE, SUITE 330
1.4 CITY-ST-ZIP BOYNTON BEACH, FL 33426

☐ Change

☒ Addition

2.1 TITLE DS
2.2 NAME JOSHUA KONIGSBERG
2.3 STREET ADDRESS 1301 N. CONGRESS AVE, SUITE 330
2.4 CITY-ST-ZIP BOYNTON BEACH, FL 33426

☐ Change

☒ Addition

3.1 TITLE DT
3.2 NAME STEVEN B. TEETERS
3.3 STREET ADDRESS 1301 N. CONGRESS AVE, SUITE 330
3.4 CITY-ST-ZIP BOYNTON BEACH, FL 33426

☐ Change

☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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.

SIGNATURE: Steven B. Teeters STEVEN B. TEETERS, TREAS. 4/27/99 (561) 733-2300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #

CR2E034 (11/98)

0400643