2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007043

Entity Name: TOWING FOR TOTS, INC.

FILED Jan 07, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1208 GEORGIA ST DELRAY BEACH, FL 33444 **Current Mailing Address: New Mailing Address:** 5266 INWOOD DR DELRAY BEACH, FL 33484 FEI Number: 65-1145337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MEDEIROS, RICHARD A 5266 INWOOD DRIVE DELRAY BEACH, FL 33484 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP (X) Change () Addition () Delete HOPKINS, DANA HOPKINS, DANA Name: Name: 10183 BOCA BENDOVER EAST #4 Address: 10183 BOCA BEND EAST #4 Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428 Title: () Delete Title: (X) Change () Addition Name: WILLIAMS, JULIE Name: WILLIAMS, JULIE Address: 10183 BOCA BENDOVER EAST #4 Address: 10183 BOCA BEND EAST #4 City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428 Title: () Delete Title: () Change () Addition TRAXLER, ROBERT G Name: Name: 5236 INWOOD DRIVE Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip: () Delete Title: DT Title: () Change () Addition Name: MEDEIROS, RICHARD A Name: Address: 5266 INWOOD DRIVE Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD A. MEDEIROS DT 01/07/2003