2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 12, 2001 8:00 am Secretary of State DOCUMENT # P0000073528 1. Entity Name HOOK & TOW INC. 04-02-2001 90084 006 ***150.00 Principal Place of Business Mailing Address 1525 N.W. 167TH STREET #150 1525 N.W. 167TH STREET #150 MIAMI FL 33169 MIAMI FL 33169 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number -1029316 Not Applicable Ζþ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCOPETTA GEORGE M. MANGUART, JULIO E Street Address (P.O. Box Number is Not Acceptable) 1428 BRICKELL AVENUE MAIN FLOOR SULTE **MIAMI FL 33131** 8. The above named entity submits this statement for the purpose of changing its registered office a registered agent, or both, in the State of Florida GEORGE M. SCORETTA SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent sign FILE NOW!!! FEE IS #150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee Will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 Change Addition mreV Deleta TITLE SCOPETTA, GEORGE M NAME NAME STREET ADDRESS CR2E034 STREET ADDRESS 1525 N.W. 167TH STREET #150 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33169 ☐ Change Addition TITLE Delete TILE NAME scopetta, John R NAMÉ STREET ADDRESS 1525 N.W. 167TH STREET #150 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33169** Delete ☐ Change Addition TITLE HORVATH, AUGUST STREET ADDRESS STREET ADDRESS :1525 N.W.: 167TH STREET #150 = CITY-ST-ZIP MIAMI FL 33169 CITY-ST-ZIP ☐ Addition Delete ☐ Channe TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an application of the empowered.

AUGUST J. HORVATH

3/08/01