2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attac

SIGNATURE:

Feb 25, 2002 8:00 am Secretary of State P00000102028 DOCUMENT # 1. Entity Name JESSE'S TOWING SERVICE, INC. 02-25-2002 90103 024 ***150.00 Principal Place of Business Mailing Address 52 WEST 14TH ST.: #4 52 WEST 14TH ST.: #4 HIALEAN FL 33010 HIALEAH FL 33010 2. Principal Place Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1055258 Not Applicable \$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 MUINO, JESSE 52:WEST 14TH ST., #4" HIALEAH FL 33010-8. The above na ts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE. 9. This corporation is viigible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D 👍 TITLE TITLE ☐ Delete NAME MUINO, JESSE NAME 52:WEST 14TH ST.; #4 STREET ADDRESS STREET ADDRESS HIACEAH FE 33040 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information ith 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 report or suppler of the corporation or the received ort 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

0 Y -214 -46,

Daytime Phone #

FILED