2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111064

FILED Jun 19, 2004 Secretary of State

Entity Name: ARROW TOWING & RECOVERY, INC.						
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
SUITE E	RS STREET TER, FL 33756					
Current Mailing Address:			New Mailir	New Mailing Address:		
SUITE E	RS STREET TER, FL 33756					
FEI Number:	59-3682936	FEI Number Applied For ()	El Number Not Appli	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
SUITE E	DAVID ERS STREET TER, FL 33756					
The above r in the State		bmits this statement for the purp	ose of changing it	its registered office or registered agent, or both,		
SIGNATURE:						
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().				Date		
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	PD () D LEVIN, CAROL J 1250 ROGERS S CLEARWATER, F	TREET, SUITE E	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VPSD () D LEVIN, LEONARD 1250 ROGERS S CLEARWATER, F	D TREET, SUITE E	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition KREJCI, SCOTT 4560 PORTOFINO WAY, UNIT 307 WEST PALM BEACH, FL 33409		
Title: Name: Address: City-St-Zip:	VP () D ELMORE, DAVID 1250 ROGERS S CLEARWATER, F	R TREET, SUITE E	Title: Name: Address: City-St-Zip:	VPSD (X) Change () Addition ELMORE, DAVID R 1250 ROGERS STREET, SUITE E CLEARWATER, FL 33756		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL J. LEVIN Ρ 06/19/2004