2. Principal F				02 NOV -8 AM 9: 16 SECRETARY OF STATE TO THE SECRETARY AMANDA		
	DO NOT WRIT	E IN THIS	and the state of t	MILAMANOEE, FLORIDA		
2. Principal Place of Business 1710 N. FORSYTH ROAD Suite, Apt. #, etc.		3. Mailing Address 1710 N. FOR	RSYTH ROAD	inack.		
		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State ORLANDO, FLORIDA		City & State ORLANDO, FLORIDA		4. FEI Number 59-3691706	Applied For	
Zip 32807	Country USA	Zip 32807	Country USA	5. Certificate of Status Desired	\$8.75 Additional	
		THE PART SOUTHWAY THE COURSE	encine Thems	7. Name and Address of Current Registe	Fee Required	
	DO NOTA	NOITE	Name DAV	ID BAUTISTA		
	DO NOT I	and the car in the case of the	est to a street to the total	s (P.O. Box Number is Not Acceptable)		
	IN THIS S	PACE	6625 BEA	MER WAY		
			City ORLAN			
. The above	named entity submits this statemen	it for the purpose of chang	ing its registered office or regist	ered agent, or both, in the State of Florida.	L Zip Code 32807	
		•	3 9 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	erse agent, or both, in the state of Florida.		
IGNATURE _	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE: Registered Agent signature requin	ed when reinstellad		
	ration is eligible to satisfy its Intangi	ble January	1 - May 1 Fee is \$150.00	ed when reinstating) DATE		
Tax filing re (See criteri	equirement and elects to do so.	After Am	May 1, Fee is \$550.00 ended UBR is \$61.25	10. Election Campaign Financing Trust Fund Contribution.	55.00 May Be	
		Make Check F	ayable to Department of St	ate	Added to Fees	
LE	DPVTS	ND DIRECTORS	TITLE 1			
ME REET ADDRESS	BAUTISTA, DAVID		NAME	40000E9E3	LEOA	
	6625 BEAMER WAY, OI	RLANDO, FL 3280	7 CITY-ST-ZIP		1. **150.00	
LE L			ine is a			
REET ADDRESS			NAME STREET ADDRESS			
Y-ST-ZIP _E		-	CITY-ST-ZIP			
ME			TITLE TO THE STATE OF			
EET ADDRESS 7-ST-ZIP		~ -	STREET ADDRESS	DO NOT WE		
E			ÇİTY-ST-ZİP	DO NOT WR		
ΙE			NAME	IN THIS SPA	CE	
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ET ADDRESS - ST-ZIP			STREET ADDRESS			
			CITY-ST-ZIP			
E			NAME			
ET ADDRESS -ST-ZIP			STREET ADDRESS GITY+ST-ZIP			
I hereby cer	tify that the information supplied wit	h this filing does not qualif	The state of the s	ction 119.07(3)(i). Florida Statutes. I further cer		
of the corpo	runs report or supplemental report or tration or the receiver or trustee em	is true and accurate and the powered to execute this re-	iat my signature shall have the seport as required by Chapter 60	ction 119.07(3)(i). Florida Statutes. I further cer larne legal effect as if made under oath; that I proposition of the state of the st	tify that the information am an officer or director	
ougo mient	with all other like o	rapowered.	DAVID BAUTISTA, F	ry rished statates, and that my hame appear	s iii Block 11 or on an	

Daytime Phone #

Date

M.T.C. TOWING, INC. 1710 N. FORSYTH ROAD ORLANDO, FL. 32807

October 24, 2002

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

Gentlemen (Madam):

Enclosed is for URB-2002 since we never received any previous notifications relating to renewal. I am also including payment for \$150.00 to cover charges for renewal. Thank you for attention in this matter.

Yours truly,

David Bautista

President