

02 **FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # **P010000079300**

1. Entity Name

**Castillo's Towing Service, Inc.**

02 DEC 11 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**13630 SW 23 Terr**

Suite, Apt. #, etc.

3. Mailing Address

**SAME**

Suite, Apt. #, etc.

City & State

**MIAMI, Florida**

City & State

4. FEI Number

**65-1132980**

Applied For

Not Applicable

Zip

**33175**

Country

**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**Leandro L Alvarez**

Street Address (P.O. Box Number is Not Acceptable)

**13630 SW 23 Terrace**

City

**MIAMI**

**FL**

Zip Code

**33175**

**DO NOT WRITE  
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$180.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PD  
ALVAREZ, LEANDRO L  
13630 SW 23 TERRACE  
MIAMI, FL 33175 USA**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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STREET ADDRESS

CITY - ST - ZIP

**500009471715  
12/11/02--01060--006 \$150.00**

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**11/26/02**

Date

**305-979-7078**

Daytime Phone

CR2E034B (12/01)

95 12/12

*Castillo's Towing Service, Inc.*

13630 SW 23 Terrace  
Miami, Florida, 33175  
(305)979-7078

Hialeah, November 26, 2002

Division of Corporation  
P.O. Box 1500  
Tallahassee, Fl 32302-1500

Ref: Document #P01000079300

This note is to inform that I never receive any form to fill the UBR this year.

I think that the reason is that I moved the last year and I forgot to inform your division, please check your records and update my new address, because I came to the accountant to make some papers and he inform to me that I am late in this renovation.

Please review your records, and see why I did not receive the forms this year if there is any other problem besides the address and update your records for the next year.

Adj. you will find a check # 1045 as payment of the 2002 UBR and please check your records and communicate if has been any change in the info lately.

Thanks for your help.



Leandro Alvarez  
President