## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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## FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

03 SEP 24 PM 8: 23

SECRETARY OF STATE-TALLAHASSEE, FLORIDA

## DOCUMENT # P02000041770

1. Corporation Name

AACTION TOWING AND RECOVERY SERVICES INC.

2. Principal Office Address 7111 NORTON AVE. Suite, Apt. #, etc. C City & State WEST PALM BEACH, FL		3. Mailing Office Address SAME Suite, Apt. #, etc. City & State						
					<sup>Zip</sup> 33405	Country USA	Zip	Country

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	Date Incorporated or Qualified To Do Business in Florida	
3.	FEI Number	 Applied For
	13-4212992	Not Applicable
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CERTIFICATE OF STATUS DESIRED 🗹

	7. Name and Address of Currer	ir vedisteled Affett	
Name JOSEPH ANTHO	NY CONDEMI		
Street Address (P.O. Box Number is	Not Acceptable) 7111 NORTON A	VENUE	
Suite, Apt. #, Etc.		<del></del>	· · ·
City WEST_PALM BEA	CH	State FL	Zip Code 33405

Signature Registered		9-23-03		
9. Name	s and Street Addresses of Each Officer and/or Direct	ctor (Florida nonprofit corporations must list at least 3 director	ors)	
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	
Р	JOSEPH A. CONDEMI	7111 NORTON AVE. SUITE C	WEST PALM BCH.,FL 33405	
V.P.	VERA GINA CONDEMI	SAME		
SEC.	CINZIA CONDEMI	SAME		
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I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I number certify unat which iming this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of dividuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate and musiquation shall have the same legal effect as if made under oath.

ALT. #561-547-0170 10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing

**SIGNATURE:** 

MOSEPH A. CONDENI SIGNATOR

9-23-03

561-662-2127 Daytime Phone #

150. W/LETTER 4 8.75

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## A ACTION TOWING &RECOVERY SERVICES, INC

7111 Norton Avenue, Suite C West Palm Beach, Florida 33405 561-547-0170

Joey65@aol.com

September 23, 2003

Department of State
Division of CORPORATIONS
409 East Gains St.
Tallahassee, Fl 32399

Dear Friend,

Please excuse the confusion with regard to document No. P02000041770. Unfortunately at inception I had to utilize a P.O. box address in Pembroke Pines. Since Sept. 2002 my corporation found its home in West Palm Beach. I didn't forward any mail from the box because the Company was not in full force until West Palm Beach when I obtained the Corps. FEI Number. Please reinstate my application waiving any penalties or extra fees under these circumstances. I appreciate the States anticipated compassion.

Sincerely, Joseph Anthony Condemi

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