2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2008 08:00 A Secretary of State **DOCUMENT # P02000046168** XPRESS RESCUE TOWING INC. Principal Place of Business Mailing Address 13940 SW 181 TERRACE 13940 SW 181 TERRACE MIAMI, FL 33177 MIAMI, FL 33177 CR2E034 (11/05) 01302008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0439532 Not Applicable \$8.75 Additional 5. Certificate of Status Desired - -Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RODRIGUEZ, GIOVANNI 13940 SW 181 TERRACE IN THIS SPACE MIAMI, FL 33177 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 03/26/08-80039-023 150.00 FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE NAME RODRIGUEZ, GIOVANNI 13940 SW 181 TERRACE STREET ADDRESS MIAMI, FL 33177 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I nereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

ING OFFICER OR DIRECTOR

Daytime Phone #