## **2004 FOR PROFIT CORPORATION**

## May 04, 2004 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P02000112612** 05-04-2004 90208 044 \*\*\*150.00 1. Entity Name A&E TOWING AND TRANSPORT, INC. Mailing Address Principal Place of Business 44044057 1970 NW 22ND STREET 1970 NW 22ND STREET POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 04272004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 81-0575481 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GUNN, J. SCOTT P.A. DO NOT WRITE ONE FINANCIAL PLAZA **SUITE 2500** IN THIS SPACE FORT LAUDERDALE, FL 33394 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE HOLTZ, EDWARD ROSS NAME STREET ADDRESS 1970 NW 22ND STREET POMPANO BEACH, FL 33069 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with altother like empowered.

**SIGNATURE:** 

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NG OFFICER OR DIRECTOR

**FILED**