

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 06, 2009
Secretary of State**

DOCUMENT# P03000093689

Entity Name: V.I.P. TOWING THE NEXT GENERATION, INC.

Current Principal Place of Business:

127 S.W. 6 AVE.
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

127 S.W. 6 AVE.
HOMESTEAD, FL 33033

New Mailing Address:

FEI Number: 56-2436508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, JORGE
16440 SW 293RD ST.
HOMESTEAD, FL 33033 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZALEZ, JORGE
Address: 16440 SW 293RD ST.
City-St-Zip: HOMESTEAD, FL 33033

Title: D () Delete
Name: CORONEL, JESUS
Address: 16440 SW 293RD ST.
City-St-Zip: HOMESTEAD, FL 33033

Title: PD (X) Delete
Name: PANTOJA, ERNESTO
Address: 1243 W 79TH ST
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORGE GONZALEZ

D

08/06/2009

Electronic Signature of Signing Officer or Director

_____ Date