## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-2IP

SIGNATURE:

## May 01, 2006 08:00 AM Secretary of State **DOCUMENT # P03000148729** TOW TRUCK GUY, INC. Principal Place of Business Malling Address 5741 NW 56TH MANOR 5741 NW 56TH MANOR CORAL SPRINGS, FL 33067-3505 CORAL SPRINGS, FL 33067-3505 04272006 CR2E034 (11/05) No Cho-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-2677915 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PETTAS, NICHOLAS P DO NOT WRITE 5741 NW 58TH MANOR CORAL SPRINGS, FL 33067-3505 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typoid or printed name of registered agent and title if applicable. (NOTE: Fregistered Agent signature required when reinstaling) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PETTAS, NICHOLAS P NAME STREET ADDRESS 5741 NW 56TH MANOR *U00000551032* 05/13/06-80084-004 150.00 CITY-ST-ZIP CORAL SPRINGS, FL 330673505 TITLE NAME STREET ADDRESS CTY-ST-782 STLE NAME STREET ACCIRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STRUCT ADDRESS CITY-ST-ZIT TITLE NAME STREET ADDRESS CITY-SY-ZIP NAME

12. I hereby certify that the information supplied with this tiling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further cartify 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 path; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my hame appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

Device Phone #