2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 10, 2004 8:00 am Secretary of State DOCUMENT # P03000152485 03-10-2004 90015 043 ***158.75 1. Entity Name AL'S WRECKER SERVICE, INC. Principal Place of Business Mailing Address 54016558 100830 OVERSEAS HICHWAY. 100830 OVERSEAS HIGHWAY-KEY LARGO, FL 33037 -KEY LARGO, FL 33037 2. Principal Place of Business 3. Mailing Address 1355 SW 31 ST. SAME 03022004 4. FEI Number Applied For SAME Not Applicable Country \$8.75 Additional SAME 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MIGUEL A. TA PANES TAPANES, MIGUEL A Street Address (P.O. Box Number is Not Acceptable) 100830 OVERSEAS HIGHWAY KEY LARGO, FL 33037 7355 SW 31 ST 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 Fiorida. I am familiar with, and accept the obligations of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE Delete TITLE TAPANES, MIGUEL A. OChange TAPANES, MIGUEL A NAME NAME 7355 SW 31ST. MIAMI, FL. 33155 199839 OVERSEAS HIGHWAY HIGHWAY STREET ADDRESS STREET ADDRESS KEY LARGO, Ft. 33037 CITY-ST-ZIP CITY-ST-ZIP D Delete ☐ Addition TITLE TITLE ARCIA JORGE GARCIA, JORGE NAME NAME 100830 OVERSEAS HIGHWAY HIGHWAY STREET ADDRESS STREET ADDRESS KEY LARGO, FL 33037-CITY-ST-ZIP CITY-ST-ZIP IAMI. □ Delete ☐ Addition NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 empowered.

MIGUEL A , TAPANES 3/8/64

FILED