2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 05, 2007
Secretary of State

DOCUMENT# P04000075501

Entity Name: MIAMI, FLORIDA TOWING INC.

Current Principal Place of Business:

3595 SW 143RD CT
MIAMI, FL 33175

New Principal Place of Business:

5635 SW 5 TR
CORAL GABLES, FL 33134

Current Mailing Address:

3595 SW 143RD CT
MIAMI, FL 33175

New Mailing Address:

5635 SW 5 TER
CORAL GABLES, FL 33134

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PONCE, SARAHI
3595 SW 143RD CT
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

PONCE, SARAHI P
5635 SW 5 TER
CORAL GABLES, FL 33134 US

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: SARAHI PONCE 04/05/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: PONCE, SARAHI
Address: 3595 SW 143RD CT
City-St-Zip: MIAMI, FL 33175

Title: PD (X) Delete
Name: MEJIA, CESAR A
Address: 3595 SW 143RD CT
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: PONCE, SARAHI VP
Address: 5635 SW 5 TER
City-St-Zip: CORAL GABLES, FL 33134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SARAHI PONCE P/VP 04/05/2007
Electronic Signature of Signing Officer or Director Date