

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000009972

FILED
Apr 28, 2006
Secretary of State

Entity Name: LEO T'S TOWING AND RECOVERY, INC.

Current Principal Place of Business:

2900 QUANTUM LAKES DR.
BOYNTON BCH., FL 33426 US

New Principal Place of Business:

Current Mailing Address:

2900 QUANTUM LAKES DR.
BOYNTON BCH., FL 33426 US

New Mailing Address:

FEI Number: 57-1216806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAVAREZ, WENCESLAO L OWNER
2900 QUANTUM LAKES DR.
BOYNTON BCH., FL 33426 US

Name and Address of New Registered Agent:

TAVAREZ, WENCESLAO L
2900 QUANTUM LAKES DR.
BOYNTON BCH., FL 33426 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: WENCESLAO L. TAVAREZ

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TAVAREZ, WENCESLAO L OWNER
Address: 2900 QUANTUM LAKES DR.
City-St-Zip: BOYNTON BCH., FL 33426 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TAVAREZ, WENCESLAO L
Address: 2900 QUANTUM LAKES DR.
City-St-Zip: BOYNTON BCH., FL 33426 US

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: WENCESLAO L. TAVAREZ

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date