## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000055720

City-St-Zip:

FILED Apr 28, 2006 Secretary of State

Entity Name: RIGO TOWING & RECOVERY SERVICE INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
830 BLACK LAMB TERRACE APOPKA, FL 32703			307	1151 POST LAKE PLACE 307 APOPKA, FL 32703 US		
Current Mailing Address:				New Mailing Address:		
830 BLACK LAMB TERRACE APOPKA, FL 32703			307	1151 POST LAKE PLACE 307 APOPKA, FL 32703 US		
FEI Number:	20-2692287	FEI Number Applied For ( ) FEI	Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
CEDENO, F 830 BLACK APOPKA, F	RIGOBERTO J LAMB TERRA L 32703 US	CE	2471 E SE	PROFESSIONAL ACCOUNTANTS & CONSULTANS, INC 2471 E SEMORAN BLVD APOPKA, FL 32703 US		
The above in the State		bmits this statement for the purpos	e of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	VAREZ		04/28/2006			
	Signature of Registered Agent		Date			
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP () E CEPEDA, MIRIAN 476 TAMARACK S ALTAMONTE SPE	ST.	Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition IGOBERTO L LAKE PLACE APT # 307 - 32703 US	
Title: Name: Address: City-St-Zip:	()[	elete	Title: Name: Address: City-St-Zip:	VP,S CEPEDA, M 254 TAMARA ALT SPRING		
Title: Name: Address:	( ) [	elete	Title: Name: Address:	T FORTUNE, I 1151 POST	()Change(X)Addition √IARIA LAKE PLACE APT#307	

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.

City-St-Zip: APOPKA, FL 32703 US

SIGNATURE: RIGOBERTO L CEDENO JR. P 04/28/2006