2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000063554 1. Entity Name CEDO TOWING INC Principal Place of Business 790 72 AVE N ST PETERSBURG, FL 33702 2. Principal Place of Business AV. N Suite, Apt. #, etc. City & State ST. PETERSBURG FL City & State City & State Country Zip Country				06 DEC - 1 PM 12: 00 1022006 REIN-P CRZE098 (1 V05) 2006 4. FEI Number 20-2686930 Applied For Not Applicable \$8.75 Additional
393702 Country SA Zip Cou		Country	′	5. Certificate of Status Desired Fee Required
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent
RADOVANOVIC, CEDO 790 72 AVE N ST PETERSBURG, FL 33702				P.O. Box Number is Not Acceptable)
			City	FL Zip Code
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 CECTO CONTROL Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00				
10.	OFFICERS AND DIRECTORS	11.	•	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME P,VP RADOVANOVIC STREET ADDRESS 790 72 AVE N	C. CEDO	TITLE NAME STREET	ADDRESS	Change - Addition 300081737563
CITY-ST-ZIP ST PETERSBURG, FL 33702			T-ZIP	11/13/0601038003 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	CITY-S	ADDRESS T-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete 	TITLE NAME STREET CITY-S	address It-zip	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Oelete	TITLE NAME STREET CITY-S	ADORESS IT-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS it-zip	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	CITY-S		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 all other like empowered. SIGNATURE: SIGNATU				

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CEDO TOWING INC 790 72nd AVENUE NORTH ST. PETERSBURG, FL 33702

This letter is regarding Ref. No. P05000063554 and the Reinstatement Form. We were told that we had to pay a total fee of \$750.00 if we recieved previous warnings. We never recieved these warnings and it said we still had to pay the \$750.00. I talked to an employee at the Division of Corporations a couple of times and they said that the total fee was now \$150.00. I paid the \$150.00 adn then recieved the form back along with a letter saying that \$600.00 was still needed. Then I was told to write a letter explaining that we never recieved warning notes. This is the letter, so if you could please take care of this matter. This letter will be attached to the Reinstatement Form and the letter I recieved from the Division of Corporations.

If you have any questions for me, you can reach me at (727) 543-2139.

Thank you, Cedo Radovanovic