

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000033727

FILED
Sep 09, 2008
Secretary of State

Entity Name: SUNCOAST TOWING SERVICE, INC.

Current Principal Place of Business:

20769 NW 41ST AVENUE RD
MIAMI GARDENS, FL 33055

New Principal Place of Business:

155 EAST 13 STRET
HIALEAH, FL 33010

Current Mailing Address:

20769 NW 41ST AVENUE RD
MIAMI GARDENS, FL 33055

New Mailing Address:

155 EAST 13 STRET
HIALEAH, FL 33010

FEI Number: 20-0864643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NODA, HILDA M
20769 NW 41ST AVENUE RD
MIAMI GARDENS, FL 33055 US

Name and Address of New Registered Agent:

NODA, HILDA M
155 EAST 13 STREET
HIALEAH, FL 33010 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: HILDA M NODA

09/09/2008

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: PD () Delete
Name: NODA, HILDA M
Address: 20769 NW 41ST AVENUE RD
City-St-Zip: MIAMI GARDENS, FL 33055

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NODA, HILDA M
Address: 155 EAST 13 STREET
City-St-Zip: HIALEAH, FL 33010

Title: VP () Change (X) Addition
Name: ACOSTA, LAZARO
Address: 155 EAST 13 STREET
City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify 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: HILDA M NODA

PRS

09/09/2008

Electronic Signature of Signing Officer or Director

Date