

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000084473

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** IMPACT TOWING AND RECOVERY INC

**Current Principal Place of Business:**

3389 SHERIDAN STREET  
HOLLYWOOD, FL 33021 US

**New Principal Place of Business:**

**Current Mailing Address:**

3386 SHERIDAN ST  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

3389 SHERIDAN STREET  
HOLLYWOOD, FL 33021 US

**FEI Number:** 57-1174608

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DARVILLE, CHEVES W SR  
1805 N 22ND AVE  
HOLLYWOOD, FL 33020 US

**Name and Address of New Registered Agent:**

DARVILLE, CHEVES W SR  
1 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 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:** CHEVES W DARVILLE SR

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DARVILLE, CHEVES W SR  
**Address:** 1 SOUTH PINE ISLAND RD  
**City-St-Zip:** PLANTATION, FL 33324 US

I hereby 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 all other like empowered.

**SIGNATURE:** CHEVES W DARVILLE SR

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date