## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000048690 (0)

CONTINENTAL TOWING & MOTORS, INC.

Mailing Address 5889 SW 70 ST MIAMI FL 33143 US		
	MIAMI FL 33143 US	

**FILED** Apr 29 1998 8:00am Secretary of State



					ini ipida alila dali aai dari	
Principal Plac	e of Business	Mailing Address			64. 18.18 \$11.14 18111 \$611 1881	
5889 SW 70		5889 SW 70 ST				
MIAMI FL 33143 US		MIAMI FL 33143		DO NOT WRITE IN THIS SPACE		
US		US		3. Date Incorporated or Qualified		
				07/13/1993		
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0423292	Not Applicable	
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible	
24	25	29 3		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	i Agent	
ดูม	INTANA. ROBERTO		81 Name			
	5889 SW 70 ST			dress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33143			82 Street Add	2.000 (1.0. DON 140/100) to 140/1/1000ptuble)		
	mount is doing					
			84 City	·	OR Zin Code	
			84 City	FI	S5 Zip Code	
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in this State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (NOTE:	Registered Agent signature requ	uired when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		Change Addition	
NAME	QUINTANA, ROBERTO		1.2 NAME			
STREET ADDRESS	10221 S.W. 142ND COURT		1.3 STREET ADDRESS			
CITY-ST-Z#P	MIAMI FL 33186		1.4 CITY-ST-ZIP			
TITLE	SD	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	QUINTANA, FLORENTINO R		2.2 NAME			
STREET ADDRESS	10221 S.W. 142ND COURT		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186		2. 4 CITY-ST-ZIP			
TITLE	T	☐ DELETE	3 1 TITLE		Change Addition	
NAME	QUINTANA, JULIO		3.2 NAME			
STREET ADDRESS	10231 S.W. 142ND COURT		3.3 STREET ADDRESS	•	İ	
CITY-ST-ZIP	MIAMI FL 33186		3.4. CITY - ST - ZIP		<b>I</b>	
TITLE	V	☐ DELETE	4.1 TOTLE		Change Addition	
NAME	WASHINGTON, NELSON		4. 2 NAME			
STREET ADDRESS	6500 SW KENDALL LAKES DR.		4.3 STREET ADDRESS		j	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP			
THILE		☐ DELETE	5.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition	
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		j	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	61 TITLE		Change Addition	
NAME		_	6.2 NAME			
STREET ADORESS			6.3 STREET ADDRESS		ì	
CITY-\$1-ZIP			6.4 CITY - ST - 21P			
OULT-01-EIF			■ 0.7 OH 1 - Of 500			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

-23-98 /301/667-6132