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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9300050317 (5)

RONNIE TOWING & RECOVERY INC.

FILED Apr 16 1996 8:00 am Secretary of State

DOMNIE TOWNE & NECOVENT, MO.					
Principal Place	of Business	Mailing Address		1 IDDIIODI KAE IBIBO AIJII ODIII BUK	E MAIN ANNUN ANNA MENAN NINA NINA NAN NEAL NEAL
171-A NW 4TH ST.		171-A NW 4TH ST.			
BOCA RATON FL 33432		BOCA RATON FL 33432			
US		US		3. Date incorporated or Qualified	3a, Date of Last Report
				07/13/1993	05/01/1995
2. Principal Pla	ce of Business	2a. Mailipg Address		4. FEI Number	Applied For
21		26 24/9 8.12	mmercial Bl	65-0429852	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional
22		27 Ste A		3. Certificate of Status Desired	Fee Required
City & State		City 8, State		6. Election Campaign Financing	\$5.00 May Be
23	<u></u>	28 6 7 4 HUARI	agie, re	Trust Fund Contribution	Added to Fees
Zip	Country	ZODODO	Country	8. This corporation has liability for	-
24	9. Name and Address of Current	29 33308	30 US	Florida Statutes Yes	S No
,	9. Name and Address of Current	negistereu Agent	81 Name	10. Name and Address of New 1	registered Agent
BONNIE, JACK				ress (P.O. Box Number is Not Acceptal	merpial Blus
801 SOUTHWEST 8TH TERRACE				7919 E. COM	HEI GING BIDIS
BOCA RATON FL 33486				Steff	
	/ \		84 Cit 1	Inuda dala	EI 85 Zio 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 agent, or both, in the State of Figure 2 agent. I am familiar with, and accept the obligations of Sections (7,0505, Florida Statutes). 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.					
1/1// ₂ 0/ Tat					
SIGNATURE Signature, typed or printed nature of registered agent and title if applicable. (NOTE: Registere's Agent signature recycled when reinstating) ONTE					
12.	OFFICERS AND	DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	RES, O	Change
NAME	BONNIE, JACK	l	12 NAME	inda BONNIE M	_, '
STREET ADDRESS	601 SOUTHWEST 8TH TERRA	(CE	13 STREET ADDRESS	TIA N.W. Y	Stract
C(TY-ST-Z(P	BOCA RATON FL 33486		1.4 CITY-ST-ZIP	OCA RATON FL.	33432
TITLE	D	DEFELE	2 1 TITLE	P	Change Addition
NAME	EARLS, DON JR	_ /	22 NAME	AMES ROBERT BOD	NNIE,
STREET ADDRESS	252 SOUTHWEST 6TH STREE	3	23 STREET ADDRESS	71 A NW 494 ST	reet
CITY - ST - ZIP	BOCA RATON FL 33432		24 CITY-ST-ZIP	DCA RATON, FL.	33432
TITLE		☐ DEFELE	3 1 Tille \$	-C	Change Addition
NAME			3 2 NAME	INDA BONNIE	
STREET ADDRESS			3.3 STREET ADDRESS	1 A N.W. GASTre	201/00
CITY - ST - ZIP		☐ DELETE	3.4 CHY-ST-ZIP 3.4 CHY-ST-ZIP	DEA KATON, FL 3	Change X Addition
TITLE		P) percie		RESURET DO	Change X Addition
NAME OVERES ADDRESSO				Ames Robert 130	70,00
STREET ADDRESS			4.3 STREET ADDRESS	DIA N.W. 49% ST.	2//20
Crty-St-ZiP		☐ DELETE	4.4 CITY - ST - ZIP 5. 1 TIBLE	DUCH KHTON, PL3	Change Addition
NAME		Decen	5.2 NAME		EJ Change EJ Modulett
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-S*-ZIP TI*LE		[7] DELETE	5 4 CITY - ST - ZIP 6. 1 TITLE		Change
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CHY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do hereby			hed and does not qualify	for the exemption stated in Section 119	
				ate and that my signature shall have the	

1. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not quality for the exemption stated in Section 119.0/(3)(k), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if planged, or on an attaghment with an address.

SIGNATURE:

Linda Bonnie LINGA BONNIE AND TYPED OR PHYTE BONNIE

4-11-96 Date 347-1846 Daytine Phone #