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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000056452 (4)

FILED Apr 21 1998 8:00am Secretary of State

	TON TOWING & RECOVE	RY, INC. Mailing Address						
•		6099 DEACON RD.						
6099 DEACON RD. SARASOTA FL 34238		SARASOTA FL 34238			DO NOT WRI	TE IN THIS	SPACE	
					3. Date Incorporated or Qualified	,		
					08/11/1993			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21		26			65-0420770		N ₁	ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		+	Additional
22		27						equired
City & Stat	te	City & State			Election Campaign Financing			May Be
23		28	Country		Trust Fund Contribution			to Fees
Zip	Country	Zip	Country 30	•	This corporation owes or has Personal Property Tax due Ju			itangibie ☑ No
24	25 9. Name and Address of Curr	29]	30		10. Name and Address of New			
		on nogotoros Agent	81	Name		•		
	BRITTON, RANDAL S							
	199 DEACON RD. ARASOTA FL 34238		62	Street Add	Iress (P.O. Box Number is Not Accept	(able)		
SH	44A3UIA FL 34236		83					
							11 70	0 1
			84	City		FL	85 Zip	Code
	am familiar with, and accept the obl	ite of Florida. Such change was ligations of, Section 607.0505, F	authorized by forida Statutes	the corpora s.	poration submits this statement for the attended to the statement of directors. I hereby according to the statement of the st	cept the app	ooiniment as	s registered
office or agent. I a SIGNATURE	Signature, typed or printed name of registered of OFFICERS A	agent and tille if applicable (NC			ution's board of directors. I hereby acc offed when reinstating) ADDITIONS/CHANGES TO OF	DATE	D DIRECTO	RS IN 12
SIGNATURE	Signature, typed or printed name of registered of OFFICERS A	agent and title if applicable (NC	13.		kired when reinstating)	DATE		
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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 informatic indicated on this annual report or suppliemental 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 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

under S Allette

04/14/98

(941) 922-4708