

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000010701

FILED  
Apr 10, 2006  
Secretary of State

Entity Name: LEO'S TOWING SERVICE, INC.

**Current Principal Place of Business:**

12391 PEMBROKE RD  
PEMBROKE PINES, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 246022  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

FEI Number: 65-0468436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUBIO, HUMBERTO  
11591 SW 12TH STREET  
PEMBROKE PINES, FL 33025 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RUBIO, HUMBERTO  
Address: 11591 SW 12 ST  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP ( ) Delete  
Name: RUBIO, CAROLINA  
Address: 11591 SW 12 ST  
City-St-Zip: PEMBROKE PINES, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROLINA RUBIO

VP

04/10/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date