2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000014017

Entity Name: BJ'S TOWING & RECOVERY, INC.

FILED Apr 08, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

12895 AUTOMOBILE BLVD CLEARWATER, FL 33762 US

Current Mailing Address: New Mailing Address:

1753 GREENHILL DRIVE CLEARWATER, FL 33755

FEI Number: 59-3225532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HAWORTH, JONATHAN

12895 AUTOMOBILE BLVD

CLEARWATER, FL 34622 US

HAWORTH, JONATHAN

12895 AUTOMOBILE BLVD

CLEARWATER, FL 33762 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: 04/08/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

P () Delete Title: DP (X) Change () Addition

Name: HAWORTH, JÓNATHAN Name: HAWORTH, JÓNATHAN Address: 1753 GREENHILL DR. Address: 1753 GREENHILL DR. City-St-Zip: CLEARWATER, FL 34615 City-St-Zip: CLEARWATER, FL 33755

Title: DVST () Delete Title: DVST (X) Change () Addition

Name:HAWORTH, CHRISTINE AName:HAWORTH, CHRISTINE AAddress:1753 GREENHILL DR.Address:1753 GREENHILL DR.City-St-Zip:CLEARWATER, FL 34615City-St-Zip:CLEARWATER, FL 33755

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTINE HAWORTH DVST 04/08/2003