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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400030618 (0)

A DISCOUNT TOWING, INC.

FILED Jan 27 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address								##!! ##! 4!# >#!!! #!#!! ## !!!	70111 95 11 9919	t inter dälle bile:	I ALDEL LUIS ORDI
2182 NORTHWEST 18TH AVENUE STE. 9 2182 NORTHWEST 18TH POMPANO BEACH FL 33068 POMPANO BEACH FL 331					iue st	E. 9	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
								121/1994	led		
2. Principal Place of Business 2a. Mailing Address							4. FEI Nu			A	pplied For
26							6	5-0494336			ot Applicable
Suite, Apt. #	Suite, Apt. #, etc.	, Apt. #, etc.				ate of Status Desired	, 🗆		Additional		
22		City & State							equired		
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Zip	Country	28]	Zip	Co	ountry			orporation owes or ha			
24	25	29	r	30	•			al Property Tax due	•		No No
	g. Name and Address of Curr	ent Regis	tered Agent		工		10. Name	and Address of Nev	v Registered	I Agent	
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22			82	Street Addr		Number is Not Aper	ptable)	11.0			
P(DMPANO BEACH FL 33062				83	400		ATLAN	<u> </u>	RIN	77
					63	SU	TTE(リフ			
					84	Cipau	DANA	BEACH	FI	85 Zip.	3060
44 Pursuant to	the provisions of Sections 607.0	502 and 6	07 1508 Florida Sta	atutes the	above	named corr	oration subm	Its this statement for t	the purpose	of changing i	is registered
office or re	o the provisions of Sections 607.0 gistered agent, or both, in the Sia i familiar with, and accept the Joh	te of Floric	ia. Such change w	as authoriz	ed by	the corporat	tion's board of	directors. I hereby a	ccept the ap	pointment as	registered
	rtamınar witir, and accept the obi	igations ex	JOCHOT 107.0505,	, rionga si	atutes.				1-15	5-98	
SIGNATURE 5	signature, type or privide name of registered a	gent and title	Japplicabl (1	NOTE: Registe	red Agen	t signature requir	red when reinstating))	DATE		
12.	OFFICERS A	ND DIRLO		13			ADDITIO	NS/CHANGES TO C	FFICERS AN	ID DIRECTOR	RS IN 12
TITLE	DPST		☐ DELETE	1.1	TITLE					☐ Change	Addition
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14. Thereby 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 frue 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.

CIGNATURE.

Chille Holt

1-15-98

(954)783-5030