

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 DEC -3 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000030618

1. Corporation Name

A DISCOUNT TOWING, INC.

Principal Place of Business

Mailing Address

~~2182 NORTHWEST 18TH AVENUE STE. 9~~
~~POMPANO BEACH FL 33069~~

~~2182 NORTHWEST 18TH AVENUE STE. 9~~
~~POMPANO BEACH FL 33069~~



2001 UBR

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

1970 NW 22ND ST

Suite, Apt. #, etc.

City & State

POMPANO BEACH

Zip

33069

Country

USA

3. New Mailing Office Address, If Applicable

900 E. ATLANTIC BLVD

Suite, Apt. #, etc.

SUITE 17

City & State

POMPANO BEACH

Zip

33060

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/21/1994

5. FEI Number

65-0494336

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|----------|--------------------------------------|---|--------------------|
| DPST | HOLTZ, SEYMOUR A | 2182 NW 18TH AVENUE STE. 9 1970 NW 22ND ST POMPANO BCH FL 33069 | POMPANO BEACH FL |
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| | | | |
| | | | |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

STUPARITZ, ALAN D.
900 E. ATLANTIC BLVD.
SUITE 17
POMPANO BEACH FL 33060

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date

11-15-01

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-15-01

Date

954-975-0242

Daytime Phone #

Small Business Accounting
Electronic Filing
Same Day Incorporation Service

ALAN D. STUPARITZ, P.A.

Alan's Accounting & Tax Service
900 E. Atlantic Blvd., Suite 17
Pompano Beach, Florida 33060
(954) 783-5030
FAX (954) 783-2578

242
Tax Return Preparation
Prior Year Returns
Notary Public

November 26, 2001

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

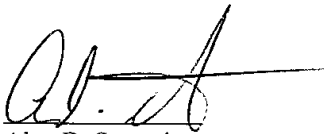
RE: P94000030618

Gentlemen:

The above referenced corporation, A Discount Towing moved their operations location in early fall 2000. As a result they did not receive their UBR for 2001. They had a forward in for all their mail, however, the forward expired prior to the UBR being mailed out. As it turned out, the new tenant in their old location, handed the Dissolution to them in November 2001.

We request that the Corporation be reinstated and have included a check for \$150.00. We also request that you abate any related penalties associated with reinstatement.

Sincerely,



Alan D. Stuparitz
Accountant