

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000038448 (4)

1. Corporation Name

VELEZ WRECKER SERVICE, INC.



Principal Place of Business

4610 N CORTEZ AVE
TAMPA FL 33614
US

Mailing Address

PO BOX 260311-1185
TAMPA FL 33685
US

3. Date Incorporated or Qualified
05/18/1994

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

21 5005 N HALE AVE

Suite, Apt. #, etc.

22

City & State

23 TAMPA FL

Zip

24 33614

Country

25 Hillsb

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number
59-3247745

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

VELEZ, HECTOR F
5013 N. LOIS AVE.
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature] president

(Signature of Registered Agent required when changing)

4-15-96
DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

D
VELEZ, HECTOR F.
5013 N. LOIS AVE.
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

D
VELEZ, ANA S.
5013 N. LOIS AVE.
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

200001832232
-05/21/96--01086--008
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] president. Hector F. VELEZ 4-15-96

Da/Serial Phone #

CR2E034 (12/95)