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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9400053430 (2)

1. Corporation Name

SUN	COAST TOWING & STORAG	GE, INC.							
Principal Place	e of Business	Mailing Address				L 58 BLIDDI 110 HAND BIRIT BRIN B		aio i d iado hist	DHEBB IIIII BEII HEBF
2467 PEMBROKE ROAD HOLLYWOOD FL 33020 2467 PEMBROKE HOLLYWOOD FL 33020			-··•						
						3. Date Incorporated or Qualified	3a. [Date of Last I	•
a Principal D	lace of Business		· · · · · · · · · · · · · · · · · · ·			07/19/1994		06/30/	1995
2. Frincipal Fi	lace of Business	2a. Mailing Address			4. FEI Number			Applied For	
Suite, Apt.	# etc	Suite, Apt. #, etc.			65-0540067			Not Applicable	
22		27			5. Certificate of Status Desired	[]	-	5 Additional Required	
City & State	e	City & State			6. Election Campaign Financing		\$5.0	0 May Be	
Zip	Country	Zip Country .		Trust Fund Contribution			ed to Fees		
24	25	29	30	ııry		This corporation has liability for Florida Statutes			199.032,
[]	9. Name and Address of Curren		30			Florida Statutes Yes 10. Name and Address of New F			
				81	Name	IO. Hame and Address of New F	Pisteri	o wann	
407 L	SON, EDWARD E INCOLN ROAD			82	Street Addi	ress (P.O. Box Number is Not Acceptab)-e)		
PH-SE			ľ	83					
MIAMI BEACH FL 33139				84	City	FL 85 Zip Code			ıp Code
familiar wi	to the provisions of Sections £07.0502 red agant, or both, in the State of Floric fli, and accept the obligations of, Secti Signal re typed or printed name of rugistered agent.	on 607.0505, Florida Statutes	sed by the co S.	orpo	ration's boai	ation submits this statement for the pur rd of directors. I hereby accept the app	pose of contract	changing its as registered	registered office d agent. I am
12.	OFFICERS AND			Agent	signaturu require	d when reinstaring:	DATE		
TITLE	DP OFFICER AND	DELETE	13.	1. 1 TITLE		ADDITIONS/CHANGES TO OFF	ICERS A		
NAME	GONZALEZ, EDWIN F		1.2 NAME					☐ Change	☐ Addition
STREET ADORESS	2467 PEMBROKE RD.		1.3 STREET ADDRESS		UNDBESC				
CITY-S1-2IP		HOLLYWOOD FL 33020		1.4 City-St-ZiP					
TITLE	DS			2 1 TOTLE				Change	Addition
NAME	FESTA, MARK	FESTA, MARK		2.2 NAME					7,52,000
STREFT ADDRESS	2467 PEMBROKE RD.		2.3 STREET ADDRESS		DDRESS				
CrTY+ST-ZIP	HOLLYWOOD FL 33020	HOLLYWOOD FL 33020		2 4 CITY - ST - ZIP					
TITLE		☐ DELETE	3. 1 TIT	3. 1 TITLE				Change	Addition
NAME	}		3.2 NAME						—
STREET ADDRESS			3.3. STF	3.3. STREET ADDRESS					
CITY-ST-ZIP			3.4 CITY-5		- ZIP				
TITLE		☐ DELETE	4.1 (1)	4. 1 TITLE				☐ Change	☐ Addition
NAME			4.2 NAN	4.2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS		ODRESS				
CITY-SI-ZIP		fra no. cre	4.4 CHY+ST-ZIP		- ZIP				
TITLE NORME		☐ DELETE		5. 1 TITLE				Change	☐ Addition
NAME CIDEET ADDRESS			5.2 NAN						
STREET ADDRESS			5 3 STRI						
CITY-ST-ZIP TITLE		DELETE	5.4 CITY		ZIP				- 12 m
NAME		□ preceit						☐ Change	☐ Addition
STREET ADDRESS			62 NAM		DODGE				
CITY-ST-ZIP			6.3 STRI						

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 13 if changed, or on an attachment with an address.

SIGNATURE: LA JAB PRES ELWIN F. GONZOLEZ
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2/28/96

(954)927-196D