

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

INCORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

'95 MAR -1 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000088968 (0)

1. Corporation Name
J.B. TOWING, INC.

Principal Place of Business Mailing Address
1301 S.W. 94TH COURT MIAMI FL 33174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/08/1994** 3a. Date of Last Report

4. FBI Number **65-0539088** 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

2. Principal Place of Business		2a. Mailing Address	
21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Country

9. Name and Address of Current Registered Agent

PEREZ, JOSE
1301 S.W. 94TH COURT
MIAMI FL 33174

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PEREZ, JOSE
STREET ADDRESS	1301 S.W. 94TH COURT
CITY-ST-ZIP	MIAMI FL 33174
TITLE	SD
NAME	PEREZ, RAFAEL
STREET ADDRESS	1301 S.W. 94TH COURT
CITY-ST-ZIP	MIAMI FL 33174
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information contained 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 oath, and that my name appears on Block 12 or Block 13 (if a legal change), or on an attachment with an address.

SIGNATURE: *Rafael Perez* **RAFAEL PEREZ - SECRETARY** 02/23/95 (305) 227-2120