

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90016 036 ***150.00

DOCUMENT # P95000022081

1. Corporation Name
HIGH TECH TOWING SERVICE, INC.

Principal Place of Business
1640 N.E. 137 TERRACE
N. MIAMI FL 33181
US

Mailing Address
1640 N.E. 137 TERRACE
N. MIAMI FL 33181
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1995

4. FEI Number
65-0563819

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 15599 W Dixie Hwy
Suite, Apt. #, etc.

2a. Mailing Address

26 17301 SW 33 St
Suite, Apt. #, etc.

City & State

23 North Miami Bch FL

City & State

28 miramar FL

Zip Country

24 33029 25

Zip Country

29 33029 30

9. Name and Address of Current Registered Agent

VIZCAINO, JORGE
1640 N.E. 137 TERRACE
NORTH MIAMI FL 33162

10. Name and Address of New Registered Agent

81 Name Vizcaino Jorge
82 Street Address (P.O. Box Number is Not Acceptable)
17301 SW 33 Street
83
84 City miramar FL 85 Zip Code 33029

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/20/99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME VIZCAINO, JORGE A
STREET ADDRESS 1640 N.E. 137 TERRACE
CITY-ST-ZIP N. MIAMI FL 33181

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 17301 SW 33 Street
1.4 CITY-ST-ZIP miramar FLA 33029

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby 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 true 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/20/99

CR2E034(11/98)