

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 02, 2000 8:00 am
Secretary of State

08-02-2000 90157 002 ***550.00

00076140

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000022081

1. Entity Name

HIGH TECH TOWING SERVICE, Inc.

Principal Place of Business

Mailing Address (same)

240 W. 26th Street, Hialeah, FL. 33010

2. Principal Place of Business

240 W 26th St. Hialeah

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah, FL.

City & State

4. FEI Number

65-0563819

Applied For

Not Applicable

Zip

33010

Country

Miami-Dade

Zip

Country

USA

5. Certificate of Status Desired

☒ XX

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Lance Joseph P.A.

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

9990 SW 77th Ave,

Penthouse 9

City

Miami

FL

Zip Code

33156

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Lance Joseph, P.A.

June 14th 2000

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **pres/director** ☒ Delete
 NAME **JORGE VIZCAINO**
 STREET ADDRESS **15599 W. Dixie Highway**
 CITY-ST-ZIP **N. Miami Beach, FL. 33162**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **president** ☐ Change ☒ Addition
 NAME **Gladys Zamora**
 STREET ADDRESS **240 W. 26th Street**
 CITY-ST-ZIP **Hialeah, FL. 33010**

TITLE **Vice-president/dir.** ☐ Change ☒ Addition
 NAME **Gerardo Gomez**
 STREET ADDRESS **240 W. 26th Street**
 CITY-ST-ZIP **Hialeah, FL. 33010**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)