## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address

SIGNATURE:

## FILED Apr 25, 2006 08:00 AN Secretary of State DOCUMENT # P95000052924 1. Entity Name ANCHOR TOWING, INC. Mailing Address Principal Place of Business 1940 NE 153 ST 12555 BISCAYNE BLVD PMB 455 MIAMI, FL 33162 N. MIAMI, FL 33181 CR2E034 (11/05) 04242006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0594510 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent SAVITS, MONICA DO NOT WRITE 1940 NE 153 ST MIAMI, FL 33162 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 U00000532473 105/105/06-80085-017 150.00 OFFICERS AND DIRECTORS 10. TITLE NAME SAVITS, MONICA 1940 NE 153 ST STREET ADDRESS N MIAMI BCH, FL 33162 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if