FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

FILED
Mar 29 1996 8:00 am
Secretary of State

DOCUMENT # **P95000056808 (5)**

1. Corporation Name
MATT'S EXPRESS TOWING & RECOVERY, INC.

Principal Place of Business
934 14TH STREET WEST
BRADENTON FL 34205

Mailing Address
934 14TH STREET WEST
BRADENTON FL 34205

3. Date Incorporated or Qualified: **07/21/1995**
3a. Date of Last Report:

4. FEI Number: 65-1549112 [ ] 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. [X] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
MCKINNON, MATTHEW W
934 14TH STREET WEST
BRADENTON FL 34205

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 607.0505, 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 / NAME / STREET ADDRESS / CITY, ST, ZIP [ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP [ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP [ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP [ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP [ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP [ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE: PST P [ ] Change [X] Addition
12 NAME: MATTHEW W MCKINNON
13 STREET ADDRESS: 934 14TH ST W
14 CITY, ST, ZIP: BRADENTON FL 34205
21 TITLE [ ] Change [ ] Addition
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP
31 TITLE [ ] Change [ ] Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP
41 TITLE [ ] Change [ ] Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP
51 TITLE [ ] Change [ ] Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP
61 TITLE [ ] Change [ ] Addition
62 NAME
63 STREET ADDRESS: $ pay by Bank
64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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 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 added, or deleted) with an addition.

SIGNATURE: Matthew W. McKinnon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Phone #

CR2E034 (12/95)