2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000077099

1. Entity Name
URETA TOWING & REPAIRS, INC.

Principal Place of Business	Mailing Address
4650 SW 51 ST BAY 719 DAVIE, FL 33314 US	4650 SW 51 ST BAY 719 DAVIE, FL 33314 US

02262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0609176
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

URETA, LUIS C
18141 SW 18TH STREET
MIRAMAR, FL 33029

DO NOT WRITE 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	URETA, LUIS C
STREET ADDRESS	18141 SW 18TH STREET
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	ST
NAME	URETA, ELBA
STREET ADDRESS	18141SW 18TH STREET
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	V
NAME	URETA, SCARLETT
STREET ADDRESS	18141 SW 18TH STREET
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	V
NAME	URETA, GEANCARLO
STREET ADDRESS	18141 SW 18TH STREET
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	V
NAME	URETA, RENZO
STREET ADDRESS	18141 SW 18TH STREET
CITY-ST-ZIP	MIRAMAR, FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000140644
04/29/04-80170-007 150.00

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] President 04/15/2004 (954)792 8210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #