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

## FILED Apr 24, 2006 08:00 AN Secretary of State DOCUM: NT # P95000077099 1. Entity Name URETA TOWING & REPAIRS, INC. Principal Place of Business Mailing Address 4650 SW 51 ST 4650 SW 51 ST **BAY 719** BAY 719 DAVIE, FL 33314 DAVIE, FL 33314 US CR2E034 (11/05) 04192006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0609176 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent URETA, LUIS C DO NOT WRITE **18141 SW 18TH STREET** MIRAMAR, FL 33029 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 regulard when reinstaling) 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 OFFICERS AND DIRECTORS 10. TITLE URETA, LUIS C NAME U00000531035 **18141 SW 18TH STREET** STREET ADDRESS 05/06/06-80019-020 150.00 CITY-ST-ZIP MIRAMAR, FL 33029 TITLE ST U00000531035 URETA, ELBA NAME 05/06/06-80019-021 8.75 **18141SW 18TH STREET** STREET ADDRESS CITY STAZIP MIRAMAR, FL 33029 TILLE URETA, SCARLETT NAME STREET ADDRESS **18141 SW 18TH STREET** DO NOT WRITE CITY-ST-ZIP MIRAMAR, FL 33029 IN THIS SPACE NAME URETA, GEANCARLO STREET ADDRESS **18141 SW 18TH STREET** CITY-ST-7IP MIRAMAR, FL 33029 TIME URETA, RENZO NAME

12. I hereby certify that the information supplied with this filing 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 of 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.

**18141 SW 18TH STREET** 

MIRAMAR, FL 33029

STREET ADDRESS

CITY-ST-ZIP

me NAME STREET ADDRESS CATY-ST-ZIP

USE SIGNATURE