## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARIMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600003385 (7)

FILED Feb 16 1998 8:00am Secretary of State

1. Opiporation	TOWING III, INC.	000000	J (1)							
Principal Place of Business Mailing Address							i išeriodi kiú talih bitili šelih belih		TE SINDE INCOLUD	(D) E(I) (DB)
3630 N.W. NORTH RIVER DRIVE 3630 N.W. NORTH RIVER D				DRIVE		ł				
MIAMI FL 331		MIAMI FL 33142			}					
						- <u></u> -	DO NOT WRIT		SPACE	
						3.	Date Incorporated or Qualified 01/08/1996			•
2. Principal P	lace of Business	2a. Mailing Address					FEI Number		<u> ΤΙΔ</u>	plied For
21		26				"	65-0635041		<del></del>	ot Applicable
Suite, Apt.	#, otc.	Suite, Apt. #, etc.				Certificate of Status Desired		\$8.75		
22		27			5.	Certificate of Status Desired		Fee Re	equired	
City & State	9	• · · · · · ·	City & State			6.	Election Campaign Financing	_	\$5.00	
<b>23</b>	Country	and the second control of the second control of	Zip Country				Trust Fund Contribution	<u> </u>	Added t	
24	25	<u>-</u> -¬			Jetery		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Curr		29 29 rrent Registered Ager	30 J			10.	Name and Address of New R			J 110
ΔM	RCILLE, DOUGLAS W		·	81	Name					
	BRICKELL KEY DRIVE			82	Change	V A (F	O Dow Minister in Man Association	de la Y		
	ITE 406				20196	( Address	dress (P.O. Box Number is Not Acceptable)			
	IMI FL 33131		83							
				84	City				les Zin	Code
					City			FL	. 1**1	
SIGNATURE		Lageot and title if applicable AND DIRECTORS	(NOTE - F			re required when		DATE	DIRECTOR	RS IN 12
TITLE				1.1 TITLE					Change	Addition
NAME	AAAA ALMI MADTH DUKE DOUE			1.2 NAME						
STREET ADDRESS 3630 N.W. NORTH RIVER DRIVE				1.3 STREET ADDRESS		1				
CITY-ST-ZIP	MIAMI FL 33142		DELETE	1.4 CITY-S	1-ZIF	<del> </del> -			Change	Addition
TITLE NAME				2.1 TITLE	2.2 NAME				C Creange	CT Voncion
STREET ADDRESS				2.3 STREET	ADDRESS.					
CITY-ST-ZIP				2. 4 CITY - 5		Ì				
TITLE			DELETE	3.1 TITLE	<u></u>	<del> </del>			Change	Addition
NAME				3.2 NAME						
STREET ADDRESS				3 3 STREET	ADDRESS					
CITY-ST-ZIP				3.4. CITY - S	ST-ZIP	<b></b>				
THILE			DELETE	4.1 TITLE					☐ Change	Addition
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET						
CITY-ST-ZIP		<del></del>	DELETE	4.4 CITY-S	T-ZIP	<del> </del>			Change	Addition
TITLE		u	DELETE	5.1 TITLE					T CHANGE	☐ Musicion
NAME expect apposes				5.2 NAME	AD DOCCO					
STREET ADDRESS				5.3 STREET						į
CITY-ST-ZIP		·· <del></del>	DELETE	5.4 CITY-S 6.1 TITLE	1-211	<del> </del>			Change	Addition
NAME				6.2 NAME						
STREET ADDRESS				63 STREET	ADDRESS					
CITY-ST-ZIP		,		6.4 CiTY-S						

14. Thereby cortify that the information supplied with this time does not qualify for the exemption stated in Section 119.07(3)(i), 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 relevon intrustee compowered 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 man appear with an address.

SIGNATURE:

2/9/98

305-634-6999