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Mar 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000009816 (5)

1. Corporation Name
MANFREDI TOWING, INC.



Principal Place of Business

200 16TH STREET, APT. 103B
ST. AUGUSTINE FL 32084

Mailing Address

200 16TH STREET, APT. 103B
ST. AUGUSTINE FL 32084-0517

2. Principal Place of Business

21 5483 Pelican Way

Suite, Apt. #, etc.

22 City & State

23 St. Augustine, FL

Zip Country

24 32084

25

2a. Mailing Address

26 5483 Pelican Way

Suite, Apt. #, etc.

27 City & State

28 St. Augustine, FL

Zip Country

29 32084

30

3. Date Incorporated or Qualified

01/29/1996

3a. Date of Last Report

4. FEI Number

59-3363155

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

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MANFREDI, ARMANDO
200 16TH STREET, APT. 103B
ST. AUGUSTINE FL 32084

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5483 Pelican Way

83

84 City

St. Augustine

FL

85 Zip Code

32084

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Armando Manfredi

(NOTE: Registered Agent signature required when translating)

DATE

12. OFFICERS AND DIRECTORS

1. NAME ☐ DELETE

D
MANFREDI, ARMANDO
200 16TH STREET, APT. 103B
ST. AUGUSTINE FL 32084

2. NAME ☐ DELETE

3. NAME ☐ DELETE

4. NAME ☐ DELETE

5. NAME ☐ DELETE

6. NAME ☐ DELETE

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26. NAME ☐ DELETE

27. NAME ☐ DELETE

28. NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

5483 Pelican Way

1.4 CITY - ST - ZIP

St. Augustine, FL 32084

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

Armando Manfredi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-97

Date Page 2 of 2

CR2E034 (9/96)