

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90196 046 \*\*\*150.00

DOCUMENT # P96000045477

1. Corporation Name  
J.J.C. TOWING, INC.

Principal Place of Business  
400 KINGS POINT DR., #502  
N. MIAMI BEACH FL 33160

Mailing Address  
2057 N.E. 180 STREET  
NORTH MIAMI BEACH FL 33162



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1996

4. FEI Number

APPLIED FOR 65-0667750

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 owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 2057 NE 180 Street

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

23 City & State

23 NORTH MIAMI BEACH FL

27 City & State

27

24 Zip

24 33162

25 Country

25 USA

29 Zip

29

30 Country

30

9. Name and Address of Current Registered Agent

VALDEZ, CECILIA M  
400 KINGS POINT DR., #502  
N. MIAMI BEACH FL 33160

10. Name and Address of New Registered Agent

81 Name

JORGE FERNANDEZ

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

2057 NE 180th Street

83

84 City

N. Miami Beach

FL

85 Zip Code

33162

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

PRESIDENT

3-12-99

12. OFFICERS AND DIRECTORS

TITLE P VALDEZ, CECILIA M  
NAME VALDEZ, CECILIA M  
STREET ADDRESS 400 KINGS POINT DR., #502  
CITY-ST-ZIP N. MIAMI BEACH FL 33160

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT  
1.2 NAME JORGE FERNANDEZ  
1.3 STREET ADDRESS 2057 NE 180th Street  
1.4 CITY-ST-ZIP N. MIAMI BEACH, FL 33162

☐ Change ☒ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SK [Signature] REQUIRED

3-12-99 3056078242