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Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000072684 (9)**

1. Corporation Name

MARATHON WRECKER SERVICE, INC.

Principal Place of Business

**8259 OVERSEAS HWY
MARATHON FL 33050**

Mailing Address

**8259 OVERSEAS HWY
MARATHON FL 33050-3237**



3. Date Incorporated or Qualified

08/28/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BOLOGNA, SIMONE
98 CALLE ENSUENO
MARATHON FL 33050**

4. FEI Number

05-0690854

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

**PRESIDENT
SIMONE BOLOGNA
98 CALLE ENSUENO
MARATHON, FL. 33050**

TITLE NAME ☐ DELETE

**V.P.
TOMMASO CAMMARATA
P.O. BOX 837
MARATHON, FL. 33050**

TITLE NAME ☐ DELETE

**S/T
VITO MELIA
8259 OVERSEAS HWY.
MARATHON, FL. 33050**

TITLE NAME ☐ DELETE

TITLE NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ DELETE

TITLE NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ DELETE

TITLE NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

**PRESIDENT
SIMONE BOLOGNA
98 CALLE ENSUENO
MARATHON, FLA. 33050**

2.1 TITLE ☐ Change ☐ Addition

**V.P.
TOMMASO CAMMARATA
576 99TH STREET OCEAN
MARATHON, FLA. 33050**

3.1 TITLE ☐ Change ☐ Addition

**S/T
VITO MELIA
576 99TH STREET OCEAN
MARATHON, FLA. 33050**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE: *Simone Bologna*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIMONE BOLOGNA

Date

march 5/97

Daytime Phone #

0141305

CR2E034 (9/96)