FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROM CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortifym * 🚁

FILED

May 19 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000090364 (6)

Principal Place	TOWING, INC.	Mailing Address				
5201 NW 78TH TERRACE LAUDERHILL FL 33351		5201 NW 78TH TERRACE	5201 NW 78TH TERRACE LAUDERHILL FL 33351-5040			
					3. Date Incorporated or Qualified 11/01/1996	3a. Date of Last Report
2. Principal Place of Business 2a. 21 26		2a. Mailing Address			4. FEI Number 6'5-0764539	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		City & State			6. Election Campaign Financing	Fee Required \$5.00 May Be
23		28	1 2		Trust Fund Contribution	Added to Fees
Zip 24	rp Country Zip		Country 30	· This corporation has liability for line		nlangible tax under s. 199,032, Yes 🔼 No
	9. Name and Address of Curre		1001		10. Name and Address of New Reg	
	GERS, CARL S		81 1	lame		
	1 NW 78TH TERRACE		82 S	treet Addre	ss (P.O. Box Number is Not Acceptabl	θ)
LAU	IDERHILL FL 33351		83			
	•		84 C	· · · · · · · · · · · · · · · · · · ·		(1
				City 		FL 85 Zip Code
11. Pursuant l office or re agent. La	to the provisions of Sections 607.05 egistared agont, or both, in the Stati m familiar with, and accopt the oblic	02 and 607.1508, Florida Statut e of Florida. Such change was gations of, Section 607.0505, Fl	es, the above-na authorized by the orida Statutes.	amed corpo e corporatio	ration submits this statement for the punis board of directors. I hereby accept	urpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	AIOI	E: Registered Agent si			DATE
12.		ND DIRECTORS	13.	gnature required	ADDITIONS/CHANGES TO OFFICE	
1016	Pres	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	Carl S. Roser		1.2 NAME			
STREET ADDRESS CITY+ST-2IP	290 NM 26 10	3335)	1.3 STREET ADD 1.4 C TY+ST-2i	- 1		
TITLE	Lawarn My 10	DELETE	2.1 THLE	-		Change Addition
NAME	•		22 NAME			,
STREET ADDRESS	•		2.3 STREET ADD	PRESS	•*	4 t
CHY-S1-ZIP TITLE		DELETE 3:		IP .	Change Addition	
NAME	*	Jet Control	3.1 TITLE 3.2 NAME		****	
STREET ADDRESS	\ /		3.3 STREET ADDRESS			
City-St-ZiP	· · · · · · · · · · · · · · · · · · ·	□ pri cre	3.4. CITY - ST - Z	IP .	·	·
TOTUE NAME	\triangle	☐ DELETE	4.1 TITLE			ChangeAddition
STREET ADDRESS	/ \		4. 2 NAME 4.3 STREET ADD	RESS		THE STIPLOS
CHTY - ST - ZIF			4.4 CITY - ST - ZI			111011474
TITLE	7	☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS		\	5.3 STREET ADD			
CHY-S1-ZIF THLE		☐ DELETE	5.4 CITY - ST - ZI 6.1 TITLE	P		Change Addition
NAME	l	DEEL'S	6.2 NAME			ריין אומווומני ריין אמווומני
STREET ADDRESS			6.3 STREET ADD	RESS	A .	
CITY+ST-ZIP			6.4 CITY-ST-ZIP		LBA	c ded 165.00
14. I do heret informatio I am an of	by certily that the information supplie in indicated on this annual report or flicer or director of the corporation o	ed with this filing does not quali supplemental annual report is t ir the receiver or trustee empow	ty for the exemp rue and accurati rered to execute	tion stated i e and that n this report	n Section 119.07(3)(i), Florida Statutes ny signature shall have the same legal propinsed by Chapter 607, Florida St	. I further certify that the effect as if made under oath; that atutes; and that my name