## 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

## DOCUMENT # P96000096422

AVANT'S TOWING AND RECOVERY, INC.

Principal Place of Business

1310 HUDSON ST

Mailing Address

1310 HUDSON ST

## **FILED** Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90042 003 \*\*\*150.00



UHLANDU FL	32808	ORLANDO FL 32808					
<b>.</b>					DO NOT WRITE IN T	HIS SPACE	
					Date Incorporated or Qualifed     11/21/1996		
2. Principal I	Place of Business	2a. Mailing Address			4. FEI Number	<del></del>	Applied For
2. Principal Place of Business 2004 183rd Road 21 Live Oak, Fl 32060 26 Live Oak,				32064	59-3413026	<b>├</b> ─- <b>┼</b> ~	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status Desired * "	~ -\$8.75	-Additional "
City & Sta	ite	City & State			6. Election Campaign Financing	<del></del>	
23 Live Oak, Fl 28 Live Oak,				71Trust Fund Contribution A			May Be
Zip Country Zip				8. This corporation owes the current year Intangible			
24 3206		29 32064 <u></u>	30 U	.s.	Personal Property Tax.	☐ Yes	□No
·	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent	
AVA	NT, KEVIN RANDALL		8	1 Name			
1310 HUDSON ST ORLANDO FL 32808				2 Street Addr	ess (P.O. Box Number is Not Acceptable)		
				1	ress (F.O. Box Number is Not Acceptable)		
			8	3			
			8	1 City		. 85 Zip	Code
44 Durswant	to the provisions of Coeffice COZ OSCO.	1007 (505		1 1	F		
office or r	registered agent, or both, in the State of	and 607.1508, Florida Statu Florida, Such change was a	tes, the abo	re-named corp	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its	s registered
agent. I a	im familiar with, and accept the obligation	ns of, Section 607.0505, Flo	orida Statute	s.	or a board of directors. I hereby accept the app	pointment as re	egistered
SIGNATURE							ļ
12.	Signature, typed or printed name of registered agent ar	·	: Registered Ag	nt signature required	d when reinstating) DATE		
TITLE	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
NAME	AVANT, KEVIN R	☐ DELETE	1.1 TITLE			Change	☐ Addition
STREET ADDRESS	1010 1015 001 00		1.2 NAME				
	ORLANDO FL 32805		1.3 STREE	TADDRESS			{
CITY-ST-ZIP TITLE	OTILIATIDO I E 32803		1.4 CITY-	ST-ZIP			j
NAME		☐ DELETE	2.1 TITLE	ĺ		Change	☐ Addition
_			2.2 NAME				
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CITY-ST-ZIP TITLE			2.4 CITY-	ST-ZIP			
1		☐ DELETE	3.1 TITLE	1		☐ Change	Addition
NAME		•	3.2 NAME		**		
STREET ADDRESS			3.3 STREE	TADDRESS			1
CITY-ST-ZIP TITLE			3.4. CITY-	ST-ZIP			ĺ
- 1		☐ DELETE	4.1 TITLE	- 1	-	Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP_	•		ļ
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			]
CITY-ST-ZIP			5.4 CITY- S	r-ZIP			
TILE		☐ DELETE	6.1 TITLE			Change	Addition
AME			6.2 NAME				
TREET ADDRESS			6.3 STREET	ADDRESS			
ATY-ST-ZIP			64 CITY-ST	-71D			ì

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 or analytic them.