2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 AM Secretary of State

ANNUAL REPORT			Secretary of State		
DOCUMENT # P9700002541					v
1. Entity Name B & D TOWING & RECOVERY INC.					
7215 S. OBRIEN	Meiring Address 4239 W. EL PRADO BLVD. TAMPA, FL 33629	· · · · · · · · · · · · · · · · · · ·		2 (E)))	
DO NOT WRITE IN THIS SPAC		CE	04212006 4. FEI Numb 59-341 5. Certificate		CR2ED34 (11/05) Applied For Not Applicable \$8.75 Additional Fee Regulired
6. Name and Address of Current Ros GREGORY, JEANETTE 4239 W. EL PRADO BLVD. TAMPA, FL 33629	,,		IN T	NOT W THIS SP	PACE
The above named entity submits this statement for the purpose of changing its registered office or registered at the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when				oth, in the State of Flo	orida. I am familiar with, and accept
			.00 May Be led to Fees 1300000547734 05/12/06-80038-009 150_00		
18. OFFICERS AND DIRI TITLE P MAME CREECH, DENNIS STREET ADDRESS TOB BURLEWOOD STREET BRANDON, FL 33511 IHLE MAME STREET ADDRESS CITY-SI-ZIP IHLE MAME STREET ADDRESS CITY-SI-ZIP STREE MAME STREET ADDRESS CITY-SI-ZIP STREET ADDRESS CITY-SI-ZIP	ECTORS			NOT W	
TITLE		1			

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 faceiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE.

STREET ADDRESS CITY-ST-ZIP

4.78.06 1812839-4269