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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000025283 (7)

BRIDGE TOWING, INC.

FILED Mar 31 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address | | | | | 1010 100 0110 1100 1111 100 |
|---|---|-------------------------------------|--|--|---------------------------------------|
| 2645 NORTHWEST 1ST AVENUE 2645 NORTHWEST 1ST AVENUE BOCA RATON FL 33432 BOCA RATON FL 33432 | | ENUE | | | |
| BOOK TIATOR FE SOUSE | | | | DO NOT WRITE IN | 1 THIS SPACE |
| | | | | 3. Date Incorporated or Qualified | |
| 6 Dela cha el Di | | Les Maries Address | | 03/20/1997 | · · · · · · · · · · · · · · · · · · · |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | . 2nd rue | 4. FEI Number | Applied For |
| Suite, Apt. | #. etc. | 26 2540 N.W. Suite, Apt. #, etc. | · OUR IM | | Not Applicable \$8.75 Additional |
| 22 | ., | 27 | | 5. Certificate of Status Desired | Fee Required |
| City & State | (D) (C) | City & State | 01 | 6. Election Campaign Financing | \$5.00 May Be |
| 23 150CA | kutan FC | 28 Daca Kente | on fl | Trust Fund Contribution | Added to Fees |
| _ ^{Zip} շմ | 20 Con Co | Zip | Country R | 8. This corporation owes or has paid | |
| 24 554 | 25 7 | | 10 K.12. | Personal Property Tax due June 30 | |
| 9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name | | | | | |
| SOUEID, MIKE | | | | | |
| | 5 Northwest 1st avenue Ca raton fl 33432 | | 82 Street Addr | ess (P.O. Box Number is Not Acceptable |) |
| | ON HATON PL 33432 | | 83 | | |
| , | | | 0.0 | | |
| | | | 84 City | | FL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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: 12. OFFICERS AND DIRECTORS | | | Registered Agent signature require 13. | ed when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE DE AND DIDECTORS IN 12 |
| TITLE | D OFFICERS AIN | DELETE | | cas i la a la | Change Addition |
| NAME | SOUEID, MIKE | | 1.2 NAME | ", I MIKE | 7 |
| STREET ADDRESS | 2645 NORTHWEST 1ST AVEN | NUE | 1.3 STREET ADDRESS | TI NOW BY LANC | _ |
| CITY-ST-ZIP | BOCA RATON FL 33432 | | 1.4 CITY-ST-ZIP | sea Ruton FL 334 | <i>3</i> 2 |
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| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 61 TITLE | | 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 supplimental 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. 3-2698 (561)750-6226

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

STREET ADDRESS

City-ST-ZIP