

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P97000057944 (5)

1. Corporation Name
KNIGHTS TOWING, INC.

Principal Place of Business
133 LAKE PINE CIRCLE
LAKE WORTH FL 33463

Mailing Address
133 LAKE PINE CIRCLE D1
LAKE WORTH FL 33463



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>KNIGHTS TOWING, INC.</u> Suite, Apt. #, etc.		2a. Mailing Address 26 <u>KNIGHTS TOWING, INC.</u> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <u>06/30/1997</u>	
22 <u>3590 S. SR 7 SUITE 242</u> City & State		27 <u>3590 S. SR 7 SUITE 242</u> City & State		4. FEI Number <u>650770740</u>	
23 <u>MIRAMAR FL ORADA</u> Zip Country		28 <u>MIRAMAR FLORIDA</u> Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 <u>33023</u>		25 <u>BROWARD</u>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
29 <u>33023</u>		30 <u>BROWARD</u>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent YEZZI, MARIA 133 LAKE PINE CIRCLE D1 LAKE WORTH FL 33463		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 Maria A. YeZZi MARIA A. YEZZI 4-20-98
Signature typed or printed name of registered agent and filed if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIRANDA, JUAN C	1.2 NAME	
STREET ADDRESS	133 LAKE PINE CIRCLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33463	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YEZZI, MARIA	2.2 NAME	
STREET ADDRESS	133 LAKE PINE CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33463	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: Maria A. YeZZi MARIA A. YEZZI 4-20-98 9549160626

CR2E034 (10/97)