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

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9. Name and Address of Current Registered Agent

**PROFIT** CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000065069 (1) **DOCUMENT #** 

James Jr. Towing Inc.

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**WEST PALM BEACH FL 33407** 

ZOCKLEIN. STEPHEN C **932 30TH STREET** 

Principal Place of Business Mailing Address 1200 B PALM BEACH LAKES BLVD 932 30TH ST WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33407 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/28/1997 4. FEI Number 65 -076672 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing 23 Trust Fund Contribution 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible

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84 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

81 Name

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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, Sortion 607.0505, Florida Statutes. (NOTE: Registered Agent's gnature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 22 DELETE Change Addition TITLE 1.1 THUE Stephene Zocklein 932 30 St NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIF 1.4 CITY-ST-ZIP F1 33407 DELETE Change Addition TITI F 2.1 1111.6 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 City - ST- ZIP DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREFT ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 64 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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

FILED

May 08 1998 8:00am

Secretary of State

Applied For

Fee Required

Added to Fees

Yes

Not Applicable

CR2E034

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent