

4-27-98 B-5609-C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000066567 (3)

1. Corporation Name

PRICE-RITE TOWING & RECOVERY INC.



Principal Place of Business

3529 SW 12TH PLACE
FT LAUDERDALE FL 33312

Mailing Address

3529 SW 12TH PLACE
FT LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/01/1997

21. Principal Place of Business
3529 SW 12TH PLACE
FT LAUDERDALE FL 33312

2a. Mailing Address
3529 SW 12TH PLACE
FT LAUDERDALE FL 33312

4. FEI Number

65-0741999

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

City & State

FT LAUD. FLA

City & State

FT LAUD FLA

Zip

33312

Country

BROWARD

Zip

33312

Country

BROWARD

9. Name and Address of Current Registered Agent

MILLER, PATRICK A
3529 SW 12TH PLACE
FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

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 Patrick A. Miller

Agent

4-21-98

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MILLER, PATRICK A
STREET ADDRESS 3529 SW 12TH PLACE
CITY-ST-ZIP FT LAUDERDALE FL 33312

TITLE ST
NAME BECKFORD, DEBORAH K
STREET ADDRESS 1230 NW 51TH AVE
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 added to the attachment with an address.

SIGNATURE: 

4-21-98 754
321-6827

CR2E034 (10/97)