

RLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P98000079286

NOMAR TOWING AND RECOVERY INC.

Principal Place of Business

Mailing Address

## Aug 02, 1999 8:00 am Secretary of State

08-02-1999 90010 002 \*\*\*\*\*8.75 08-02-1999 90010 001 \*\*\*150.00



RT 2. BOX 1475 I PONCE DELEON FL 32455		RT 2. BOX 1475 I PONCE DELEON FL 32455				DO NOT WRIT	E IN THIS	SPACE		
					;	3. Date Incorporated or Qualified 09/08/1998				
2. Principal Place of Business - 2a. Mailing Address						I. FEI Number			Applied For	
21 1508 Skelton ST. 26 1508 Skelt				\ 5T.				X	Not Applicat	ole
Suite, Apt.		Suite, Apt. #, etc.			!	5. Certificate of Status Desired	X	\$8.75 Additional Fee Required		
City & State . City & State			-e or	6. Election Campaign Financing Trust Fund Contribution				\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cour	<del></del>		3. This corporation owes the curre	ent year			
24 324	155 25 Holmes	29 32455	30 +	tolme	<b>S</b> L	Intangible Personal Property.			No_	
	9. Name and Address of Current	Registered Agent			1	0. Name and Address of New R	egistered /	Agent	···	
01.07	THE DANGEY I		-	81 Name	50	with. Randy	1			\
ROL Course Address						ress (P.O. Box Number is Not Acceptable)				
RI 2, BUX 14/3 I						Skelton ST				
PON	NCE DELEON FL 32455		Ī	83						
				24 00				105 76	p Code	
			ļ	84 City	onc	a da lassa	FL		3455	
11 Purcuant	to the provisions of sections 607.0502	and 607 1508 Florida Statute	s. the abo	ve-named o	corporatio	n submits this statement for the pu	mose of ch	anging its	registered	
office or i	registered agent, or both, in the State o	of Florida. Such change was a	luthorized	by the corp	oration's	board of directors. I hereby accept	t the appoir	ıtment as	registered	
	am familiar with, and accept the obligation	ons of section 607.0505, FIG	mua stati	iles. L			- 7	2 70	1	Í
SIGNATURE	Signature, types or printed name of registered agent	710 70 7	TE: Register	ed Agent signatu	re required t	when reinstating)	DATE	$\frac{\omega_{f}}{f}$		
12.	OFFICERS AND		13.		<u>_</u> _	ADDITIONS/CHANGES TO OF	ICERS AN	D DIRECT	FORS IN 12	ion S
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14. I hereby co	ertify that the information supplied with t	his titing does not qualify for the	ne exemo	uon stated ii	n section	TT9.U/(3)(I), Florida Statutes. I fur	tner certify t	natine inf	o mation	1

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:

P98000019294 599663-9000-1

July 8, 1999

To Whom It May Concern:

This notice was received marked second notice, but we did not receive the first notice. I called and spoke to Danielle on July 8, 1999 and explained the situtation, and that this community is just now (this year) changing to the 911 address and are having some postal service problems.

This is the first year we have had to file the annual report, so we had no way of knowing when it would be sent to us. We did not know when to inquire about it.

Danielle told us to send a check for \$150.00 with this note explaining why.

I am truly sorry for the inconvience.

Sincerely,

Randy L. Smith