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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

FILED Feb 22, 1999 8:00 am Secretary of State 02-22-1999 90001 009 ***150.00

DOCO	MENT # P980000	085286	3					
FT. LAUDERDALE TOWING AND SALVAGE, INC.								
FI. LAU	DENDALE TOWING AND SAL	LVAGE, ING.				1 (SE1100) 118 (SIE) (ÖLLY PESIL EÖNL ÖZLIK)	PALÁR 18181 BIJER 11881	1100 100 110
Principal Plac	e of Business	Mailing Addre	ess			1 (081108) (10 1610) (011) 0011 0011 0011 0011	ikiri iriri kilik iledi	10110 MIN 1001
200 N. FEDERAL HIGHWAY 200 N. FEDERAL HIGHWAY								
FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301						DO NOT WOITE IN	1110 00AOE	
						DO NOT WRITE IN 1 3. Date Incorporated or Qualified	HIS SPACE	 -
						10/05/1998		
2. Principal P	Place of Business	2a. Mailing A	ddress	2 4th st		4. 65-0871430	Ap	plied For
21		26 700	3E 1	3 ¹² Str		. 65-00+1930		t Applicable
Suite, Apt,	#, etc.	Suite, Apt	l. #, etc. 井()(0			5. Certifcate of Status Desired	\$8.75	
City & Stat	10	27 City & St					Fee Re	`
City & Stat	ie	28 City & 30	r"Inude	rdate F	L	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip 3	2.2 11	Country		This corporation owes the current year		
24	25	29 5:	551U ₃	1 VS		Personal Property Tax.		MNo
	9. Name and Address of Current	Registered Age	nt			10. Name and Address of New Registe	red Agent	
TOO	LICLITUNI ABVE			81 Name	Į	tvi Hakmon		
ROTHSHTYN, ARYE 200 N. FEDERAL HIGHWAY				82 Street	Addres	S P.O. Box Numbers is Net Acceptable		
FT. LAUDERDALE FL 33301				83	<u> </u>	3E 10 = 311 =00		
, , , ,	B (OBEITS/IEE) E OOO !			83				
				84 City 1	7	Lauderdale	FL 85 Zp.9	22110
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508. F	lorida Statutes	the above-named	COLDOL	ation submits this statement for the purpos	e of changing its	registered
office or r	registered agent, or both, in the State of	f Florida. Such ch	ange was auti	horized by the corp	oration	s board of directors. I hereby accept the a	ppointment as re	gistered
l accentla		one of Section 60	07 0505 Floric	la Statutes				
	am familiar with, and accept the obligation	ons of, Section 60	07.0505, Florid > /	la Statutes		> 01/0	5199	-
agent. I a	Signature, typed or printed name of registered agent a	ons of, Section 60	07.0505, Florid	la Statutes. Registered Agent signature r		> 01/0	5/99	
SIGNATURE	Signature, typed or printed name of registered agent of OFFICERS AND	ons of, Section 60 and title if applicable. DIRECTORS	07.0505, Florid	da Statutes. egistered Agent signature of	required w	hen reinstatung) ADDITIONS/CHANGES TO OFFICER:	5 / 9 9 S AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agent of OFFICERS AND	ons of, Section 60 and title if applicable. DIRECTORS	07.0505, Florid	egistered Agent signature of 13.	required w	hen reinstating) ADDITIONS/CHANGES TO OFFICER: AVISO HAKMEN	5/99	
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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, with all other like empowered.

SIGNATURE: