## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000090708

City-St-Zip:

Entity Name: HERCO AUTOMOTIVE SERVICES & TOWING, INC.

FILED Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1914 WEST COLUMBUS DRIVE TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** PO BOX 260502 PO BOX 260502 TAMPA, FL 33685 TAMPA, FL 33685 US FEI Number: 59-3539866 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TORTORELLO, JOHN V 4822 BONITA VISTA DR. TAMPA, FL 33634 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition HERNANDEZ, JUAN HERNANDEZ, JUAN Name: Name: 6810 W. PARIS ST. 6810 W. PARIS ST. Address: Address: TAMPA, FL 33634 US City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition TORTORELLO, JOHN V Name: TORTORELLO, JOHN V Name: 4822 BONITA VISTA DRIVE 4822 BONITA VISTA DRIVE Address: Address: TAMPA, FL 33634 TAMPA, FL 33634 US City-St-Zip: City-St-Zip: Title: Title: () Delete CFO ( ) Change (X) Addition HERNANDEZ, ALFREDO Name: Name: 4518 GRAINARY AVE Address Address: City-St-Zip: City-St-Zip: TAMPA, FL 33624 US Title: () Delete Title: ( ) Change (X) Addition HERNANDEZ, JOHN Name: Name: Address: Address: 6810 W PARIS ST

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

TAMPA, FL 33634 US

SIGNATURE: JOHN V TORTORELLO VP V 04/29/2009