2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000103058

Entity Name: MASTER TOWING SERVICE, INC.

FILED Oct 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4138 ELECTRIC WAY PORT CHARLOTTE, FL 33980

Current Mailing Address: New Mailing Address:

P.O. BOX 494773 PORT CHARLOTTE, FL 33949

FEI Number: 65-0884259 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:

GAIK, JEFFREY S
21223 WYNYARD AVE
PORT CHARLOTTE, FL 33954 US
STREET, JOHN W
4263 WORCESTER AVE
NORTH PORT, FL 34287 US

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: JOHN W. STREET 10/23/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: GAIK, JEFFREY S Name: STREET, JOHN W

 Address:
 21223 WYNYARD AVE
 Address:
 4263 WORCESTER AVE

 City-St-Zip:
 PORT CHARLOTTE, FL 33954
 City-St-Zip:
 NORTH PORT, FL 34287

Title: S () Change (X) Addition

 Name:
 Name:
 STREET, CRYSTALRAE M

 Address:
 Address:
 4263 WORCESTER AVE

 City-St-Zip:
 City-St-Zip:
 NORTH PORT, FL 34287

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JOHN W STREET P 10/23/2006