2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 25, 2002 8:00 am DOCUMENT # P99000065445 Secretary of State 1. Entity Name 02-25-2002 90457 001 ***300 00 1-800-AUTOTOW FLORIDA, INC. Principal Place of Business Mailing Address 1446 COURT ST 1446 COURT ST CLEARWATER FL 33756 CLEARWATER FL 33756 2. Principal Place of Business 3. Mailing Address 1250 ROBERS 1250 ROGERS STREET STRee7 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0935924 Not Applicable Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEVIN, LEONARD D Street Address (P.O. Box Number is Not Acceptable) STREET 1250 ROGERS 1446 COURT ST **CLEARWATER FL 33756** City Zip Code 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (10/01) TITLE Delete Change ☐ Addition IAROCCI, EUGENE A NAME 1446-COURT ST STREET ADDRESS STREET ADDRESS OLÉARWATER FL 33756 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME TEETERS, STEVEN B NAME STREET ADDRESS 1301 N CONGRESS AVE STE 330 STREET ADDRESS CITY-ST-ZIE BOYNTON BEACH FL 33426 CITY-ST-ZIP MA TITLE ☐ Delete TITLE ☐ Change Addition Levin, Leonard D. NAME NAME 1250 Rogers Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP clearwater, CITY-ST-ZIP TITLE ☐ Delete Addition TITLE ☐ Change Allan Gold NAME NAME 1107 Old DIXIE HWY. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP hate Park, FL 33403 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address of the empowered.

SIGNATURE:

POWARD D. Levin 3/11/02 727-469-8821