CORPORATION	
REINSTATEMENT	Ī



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000085508

1. Corporation Name

SIGNATURE:

L.A. TOWING INC

FILED

O2 DEC -2 PM 1: 08

SEGRETARY OF STATE
TALLAHASSEE, FLORDA

,	•						S	
2. Principal Office Address 3. Mailing 0				Address		•		
21	1105	W58AUR	3151 SW 40 AVE					
Suite, Apt. #, etc.			Suite, Apt. #, etc.					
				بحرب مهيدي مراسبتماني		orporated or Qualified /	_	
City & Stat	6/ //		City & State		5. FEI Num		99 Applied For	
	10///	WOOD FIA	Hollyw	DON FIA		095 1732	Not Applicable	
Zip '	- /.	Country	77-02	Country	6.	0	.75 Additional Fee required	
330	9 <u>23</u>	BROWARD	33023	BROWARD	CERTIFICA	TE OF STATUS DESIRED [for a Certificate of Status	
	ļ	· · · · · · · · · · · · · · · · · · ·	7. Name a	and Address of Current R	logistered Agent			
	Name	HEATH		·	•			
	Street Ad	dress (P.O. Box Number is N 2110 $S\omega$			4 0 12/02/	1 <mark>00092986</mark> 202=-01051=-004	54 #1050 M	
	Suite, Ap	t.#,Æto.	<i>(</i>);				25 dec 3-12 1-13 - 11 - 12 13	
	City	Hollywood	<u> </u>			State Zip Code		
		-		, r ^a		FL 3302	3	
B. I, being Signature o Registered	of £	eath Wil	ve named corporation, GISTERED AGENT M	-	pt the obligations of se	Date//_2.07	1	
9. Names	and Street A	Addresses of Each Officer and	i/or Director (Florida no	onprofit corporations must	list at least 3 directors)		
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director		City / State / Zip		
ρ	Lo	REN30 PAUL	31	151 Sw to Au	IR	Hollywood	fl33023	
<u>M</u>	HE	ATH Wills	d.	1530 N 69 A	lur :	Hollywood	fl, 33024	
				110-N2				
j				·				
IO. I certify	y that I am an	officer or director or the rece	iver or trustee empowe	ered to execute this applicat	tion as provided for in o	chapter 607 or 617, F.S. I furthe	er certify that when filing	

this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, E.S., that all fees with example of section 119,07(3)(i), E.S., the information indicated and the names of individuals listed on this form do not qualify for an exemption under section 119,07(3)(i), E.S., the information indicated

on this application is true and accurate, and my signature shall the same legal effect as if made under oath.