FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

S32064 DOCUMENT #

(5)

A & R TOWING CORP.

DEERFIELD BEACH FL 33441

2. Principal Place of Business

Suite, Apt. #, etc.

21

Principal Place of Business	
FOA S.E. RTH AVENUE	

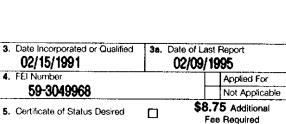
Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26





22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Ζıp Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 9. Name and Address of Current Registered Agent

GASSERT, RICHARD W. 604 S.E. 8TH AVENUE **DEERFIELD BEACH FL 33441**

	Florida Statutes Yes LI No
	10. Name and Address of New Registered Agent
81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City FI 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Symmetry typed or percentages of respectived agest and	NO Lacut also	TE Dog treed As at the day		
12.			(NOTE Progressed Agent signature required when reinstating) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
TIPLE	P	☐ DELETE	1.1 TITLE		ange [] Addition
NAMI	GASSERT, RICHARD W.		1.2 NAME		-
STREET ADDRESS	604 S.E. 8TH AVE.		1.3 STREET ADDRESS		
CHTY ST ZIP	DEERFIELD BEACH FL		14 CITY - ST - ZIP		
11'tf	VST	DELFTE	2 1 THILE	☐ Ch	ange Addition
NAME	GASSERT, ANITA		22 NAME		
STHEET ADDRESS	604 S.E. 8TH AVE.		2.3 STREET ADDRESS		
OLY ST-ZIP	DEERFIELD BEACH FL		2 4 City-St-ZiP		
THEF		☐ DELFTE	3 1 TitlE	☐ Ch	ange Addition
NAME			3 2 NAME	. •	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY CT 701			0.4.0150500		

_URY_ST-ZiP	DEERFIELD BEACH FL	2 4 CiTY-ST-ZiP	
THEF	☐ DELETE	3 1 File	Change Addition
NAME		3 2 NAME	. •
STREET ADDRESS		33 STREET ADDRESS	
CHY ST ZIF		3 4 CITY - ST - ZIP	
TITLE	☐ DEFETE	4 1 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
PREMIORALITATE		4.3 STREET ADDRESS	
CITY+51+7IP		4.4 CITY - ST - ZIP	
10cf	DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
City St Zin		5 4 CITY - ST - ZIP	
TILF	DELETE	6 1 TITLE	Change Addition

CITY-ST ZIE 6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 call, 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 on an allachmint #vith an address

6.2 NAME

6 3 STREET ADDRESS

SIGNATURE:

MAM

STREET ADDRESS

CR2E034 (12/95)