

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S86597** (9)

1. Corporation Name

FALCON TOWING OF SOUTH FLORIDA, INC.



Principal Place of Business

**10261 NORTH WEST 53RD STREET
SUNRISE FL 33351-8076**

Mailing Address

**10261 NORTH WEST 53RD STREET
SUNRISE FL 33351-8076**

2. Principal Place of Business

21 10054 N.W. 46TH STREET

Suite, Apt. #, etc.

22

City & State
SUNRISE FLORIDA

Zip
24 33351

Country
25 U.S.A.

2a. Mailing Address

26 10054 N.W. 46TH STREET

Suite, Apt. #, etc.

27

City & State
SUNRISE FLORIDA

Zip
29 33351

Country
30 U.S.A.

3. Date Incorporated or Qualified
10/10/1991

3a. Date of Last Report
01/09/1995

4. FEI Number
65-0321022

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**OWENSBY, WAYNE
10261 NORTH WEST 53RD STREET
SUNRISE FL 33351-8076**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
4311 REFLECTIONS BOULEVARD

83 **APARTMENT #102**

84 City
SUNRISE

FL

85 Zip Code
33351

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

Wayne Owensby

WAYNE OWENSBY

(Printed Name of Registered Agent)

8-13-96

DATE

12. OFFICERS AND DIRECTORS

PVST ☐ DELETE
OWENSBY, WAYNE
11035 NORTH WEST 39TH STREET, APT. #101
SUNRISE FL 33351

D ☐ DELETE
OWENSBY, WAYNE
11035 NORTH WEST 39TH STREET, APT. #101
SUNRISE FL 33351

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition
11 TITLE
12 NAME
13 STREET ADDRESS **4311 REFLECTIONS BOULEVARD** **APT #102**
14 CITY-ST-ZIP **SUNRISE FLORIDA 33351**

☒ Change ☐ Addition
21 TITLE
22 NAME
23 STREET ADDRESS **4311 REFLECTIONS BOULEVARD** **APT #102**
24 CITY-ST-ZIP **SUNRISE FLORIDA 33351**

☐ Change ☐ Addition
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition
61 TITLE
62 NAME
63 STREET ADDRESS
64 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 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Wayne Owensby
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

8-13-96

Daytime Phone #

741-9850

CR2E034 (12/95)