FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # V01172**

(8)

	J	FILE	D
Apr	10	1997	8:00am
Se	cre	tary (of State

	GONZALEZ TOWING, INC							
Principal Piac		Mailing Address			i canti mirfter finite tieffe tefte ifften if		#### #### ####))D)(1291
8521 N.W. 11TI PEMBROKE PIN	8521 N.W. 11TH STREET PEMBROKE PINES FL 330							
				,	3. Date incorporated or Qualified 12/19/1991		ate of Last Re 15/1996	eport
	lace of Busmoss	2a. Mailing Address			4. FEI Number 65-0302454		h	oplied For ot Applicable
	#, etc	Suite, Apl. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & Stat	· · · · · · · · · · · · · · · · · · ·	City & State			6. Election Campaign Financing	, ,	\$5.00	
23		28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution		Added t	to Fees
Z(p)	Country 25	Zip	Country 30	ſ	This corporation has liability for Florida Statutes		ế tax unders. ☑ No	. 199.032,
	9. Name and Address of Curr				10. Name and Address of New I	Registered	Agent	
	IZALEZ, GEORGE	,	81	Name				
	I N.W. 11ST BROKE PINE FL 33024		82	Street Add	ress (P.O. Box Number is Not Accept	able)		
· -	DITORE FIRE FE GOOZA		83				····	
			84	City		·	DE Zio (Code
i İ			ſ		poration submits this statement for the tion's board of directors. I hereby acc	FL	_ 1 1	
SIGNATURE	Signal ne aprotei printed name of registeres.	ayent and tidu if applicable (NO	E: Registered Ag	ent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AN	D DIRECTOR	PS IN 12
· IjILĒ	D	DELETE	1.1 TITLE		ADDITIONO/OTTANGES TO OFF	TOLIN NI	Change	Addition
NAME	GONZALEZ, GEORGE V.		1.2 NAME	l				
STREET ADDRESS	8521 N.W. 11TH STREET PEMBROKE PINES FL		1	ADDRESS				
CHTY-SF-7IP	rembnuke fined fl	DELETE	1.4 CITY - 5 2.1 TITLE	ST-ZIP			Change	Addition
NAME		C Otter	2.2 NAME	†			L Orange	L_1 Manifoli
STREET ADDRESS			23 STREET	ADDRESS				
CDY-51-26		- Double	2. 4 CITY-	ST-ZIP		-	T 5	
:TITLE -NAME		☐ DELETE	31 TIFLE	-			Change	Addition
STREET ADDRESS			3.2 NAME 3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY -					
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
-NAME			4.2 NAME	1.				
STREET ADDRESS CITY-ST-ZIF			4.4 CITY-5	ADDRESS				
TITLE		DELETE	5.1 TITLE	, ER			Change	Addition
NAME			52 NAME					
STREET ADDRESS			4	ADDRESS				
THILE		DELETE	5.4 CITY-5	ST-ZIP			Change	☐ Addition
NAME		Julient	6.2 NAME	1			- Similar	Fred Production
STREET ADORESS				ADDRESS				

SIGNATURE:

6.4 City-St-ZiP

14. If do hereby certify that the information supplied with this using does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 city poration or the receivity for trustee annoyeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed or onean attackment with an address.

0134070