2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 436371

Entity Name: SCRAP-ALL, INC.

FILED Mar 02, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

2801 4TH AVENUE PO BOX 5567
P.O. BOX 5567 TAMPA, FL 33675
TAMPA, FL 33675

Current Mailing Address: New Mailing Address:

2801 4TH AVENUE PO BOX 5567
P.O. BOX 5567 TAMPA, FL 33675
TAMPA, FL 33675

FEI Number: 59-1485443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 MASON & ASSOCIATES, PA
 MASON & ASSOCIATES, PA

 17757 US 19 N STE 500
 17757 US HWY 19 N

 MANGROVE BAY
 SUITE 500

 CLEARWATER, FL 33764
 CLEARWATER, FL 33764

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: ANNE MASON 03/02/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 WAX,HERBERT L.,
 Name:

 Address:
 2801 FOURTH AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 33605
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 GOLDMAN,MARK J.,
 Name:

 Address:
 2801 4TH AVENUE
 Address:

 City-St-Zip:
 TAMPA, FL 33605
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK J GOLDMAN VP 03/02/2004