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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 29 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600001253 (9)

FLORIDA AUTO & SALVAGE, INC.

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Principal Place of Busines	S	Mailing Address				,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1875 SR 207 1875 SR 207 ST AUGUSTINE FL 32086 ST AUGUSTINE FL 32089			••		ĺ		
			B 6		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					12/29/1995		
2. Principal Place of Busin	iess	2a. Mailing Address			4. FEI Number	I IA	pplied For
21		26			59-3356377	h	ot Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.				¢9.75	Additional
22		27			5. Certificate of Status Desired		equired
City & State		City & State			Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	-1	to Fees
Z ip	Country	Zip	Count	ry	8. This corporation owes or has paid t	he current year In	tangible
24	25	29	30		Personal Property Tax due June 30.] No
	and Address of Current I	Registered Agent			10. Name and Address of New Regis	lered Agent	
RING, JULIE			В	1 Name			
3505-1 US 1 S			8	Street Add	Iress (P.O. Box Number is Not Acceptable)		
ST AUGUSTIN			•	E Stieet Add	iless (1 .O. Box Northber is Not Acceptable)		
			8	3			
			<u> </u>				
			8	4 City		FL 85 Zip	Code
office or registered ag agent. I am familiar w	ent, or both, in the State of th, and accept the obligation	Florida, Such change was	: authorized b	by the corpora	poration submits this statement for the purp tion's board of directors. I heroby accept th	ie appointment as	registered
SIGNATURE Signature, typed	or proded name of registered ago of a	ind the Papplicable (NC	211 Registered A	gent signature requ	ired when reinstating)	DATE	·
12.	OFFICERS AND I	VIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 12
TOLE		DELETE	1.1 TO LE			☐ Change	☐ Addition
NAME MITCHE	LL, GRANT		1.2 NAM(
STREET ADDRESS 3541 RE	D CLOUD TRAIL		1.3 STRE	FT ADDRESS			
CITY-ST-ZIP ST AUG	USTINE FL 32086		1.4 CHY-	S1-7/P			
TITLE D		DELETE	21 1HLE			Change	Addition
NAME ZIEMBIN	ISKI-ALLEN, VERA		2.2 NAM!			•	
	IISBURG LN			1 ADDRESS	₹ 1.5		
	OAST FL 32137		2. 4 CITY	ļ			
TITLE		DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAMI	1			
STREET ADDRESS				T ADDRESS			
			3.3 STR	1			
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	-01-74		Change	Addition
jt –		E-1 OCCU	4.1 HILE	,		La Commige	
NAME CTREET ADDRESS							
STREET ADDRESS				1 ADORESS			
City-St-ZiP		DELETE	4.4 CITY			Change	Addition
TOTLE		["] NETELE	5.1 TITLE	1		∟ criange	Moningu
NAME			5.2 NAMI				
STREET ADDRESS			5 3 STRE	T ADDRESS			
CITY-ST-ZIP	—		5.4 C/1Y				
TITLE		DELETE	6.1 TITL€			☐ Change	Addition
NAME			6.2 NAM6				
STREET ADDRESS			6.3 STRE	1 ADDRESS			
CITY OF THO			C 4 017 V	(1) 710			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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 logal 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.