2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001253

Entity Name: FLORIDA AUTO & SALVAGE, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

875 SR 207 1875 SR 20

SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32086

Current Mailing Address: New Mailing Address:

1875 SR 207

ST AUGUSTINE, FL 32086

FEI Number: 59-3356377 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:

CHATILA, RIAD CHATILA, RIAD 57 MENENDEZ RD 1875 SR 207

SAINT AUGUSTINE, FL 32080 US SAINT AUGUSTINE, FL 32086 US

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: RIAD CHATILA 04/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition

Name: CHATILA, ABRAHAM R Name: CHATILA, ABRAHAM R

Address: 57 MENENDEZ RD Address: 1875 SR 207

City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: TSD () Delete Title: TSD (X) Change () Addition

 Name:
 CHATILA, RIAD
 Name:
 CHATILA, RIAD

 Address:
 57 MENENDEZ RD
 Address:
 1875 SR 207

City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D () Delete Title: D (X) Change () Addition Name: CHATILA, GHADA Name: CHATILA, GHADA

Address: 57 MENENDEZ RD Address: 1875 SR 207

City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D () Delete Title: D (X) Change () Addition

Name: CHATILA, ABDUL R Name: CHATILA, ABDUL D

Address: 57 MENENDEZ RD Address: 1875 SR 207

City-St-Zip: SAINT AUGUSTINE, FL 32080 City-St-Zip: SAINT AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RIAD CHATILA D 04/23/2007