

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019734

Entity Name: SCRAP KING LLC

Current Principal Place of Business:

5002 DOVER STREET
TAMPA, FL 33619

Current Mailing Address:

5002 DOVER STREET
TAMPA, FL 33619 US

FEI Number: 26-2070517

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREGORY, ALEXANDER C
5002 DOVER STREET
TAMPA, FL 33619 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title PRESIDENT
Name GREGORY, ALEXANDER C
Address 5002 DOVER STREET
City-State-Zip: TAMPA FL 33619

Title VP
Name HENDERSON, TIM
Address 5002 DOVER STREET
City-State-Zip: TAMPA FL 33619

Title VP
Name ZALKIN, MAX
Address 5002 DOVER STREET
City-State-Zip: TAMPA FL 33619

Title MANAGER
Name GORNALL, STUART
Address 5002 DOVER STREET
City-State-Zip: TAMPA FL 33619

Title AUTHORIZED MEMBER
Name GREGORY, LARRY
Address 5002 DOVER STREET
City-State-Zip: TAMPA FL 33619

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STUART GORNALL

MANAGER

01/16/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date