FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

384868

(6)

SNAKE ROAD AUTO SALVAGE, INC.											
Principal Place of Business Mailing Address							*	FB)1 01011 []	au aigh bibli	AIRL BIGIT ING	
1650 SALERNO ROAD SE STUART FL 34997-6426			1650 SALERNO ROAD SE STUART FL 34997-8426								
							3. Date Incorporated or Qualified 06/30/1971	1	te of Last Re)4/20/199	•	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied For	
21		26	···				59-1420518		1	Not Applicable	e
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State			6. Election Campaign Financing			O May Be	\dashv		
23		28					Trust Fund Contribution			d to Fees	- }
Zip	Country 7ip			L —	untry		8. This corporation has liability for i		ax under s	199.032,	
24	25			30			Florida Statutes Yes No				
	9. Name and Address of Curre	nt Regist	ered Agent		81 1		10. Name and Address of New R	egistered	Agent	· · · · · · · · · · · · · · · · · · ·	
00011	AARAT B				" '	Name JO	HN W. EVERETT				
	ROBERT B.				82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)			
	.S. HWY. ONE				83						_
N. PALM	BEACH FL 33408				63	55	1 BENOIST FARMS	RD]
					84	City	ST PALM BEACH	FL	85 Zr	Code 3411	
or registere familiar with SIGNATURE	od agent, or both, in the State of Floin, and accept the poligations of Section accept the policy of the policy	ida. Such Jon 607.0	change was authorize 0505, Florida Statutes.	ed by the	corpore	ation's board JO	ation submits this statement for the pure of directors. I hereby accept the appropriate W. EVERETT when reinstating	sintment a	s registered	egistered offici Lagent, Lam	
12.	OFFICERS AF	ND D-FIE.C	era como em aragone rema el maso, como manda antida de casa	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	RS IN 12	795
TITLE	PD		DELETE	1, 13	TILE	-			Change	Addition	CR2E034 (12/
NAME	EVERETT, IRENE			1.2 N	AME						8
STREET ADDRESS 116 BARBARTON RD				1.3 S	1.3 STREET ADDRESS						1
CITY-ST-ZIP	LAKE WORTH FL		PO SECTI		ITY - ST - J	74P					兴
TITLE			DELETE	2 1 7					Change	Addition	١
NAME				2.2 N							
STREET ADDRESS					STREET AD						
CiTY - ST - ZiP			DELETE		11Y - ST - 1	ZIP			☐ Change	☐ Addition	
TITLE NAME			[] bittit	3. 1 1 3.2 N						L] Modition	
STREET ADDRESS					STREET AL	JUDE GG					
CITY-ST-7IP					OTY-SI-						
TITLE			DELE1E	4.11		-			Change	☐ Addition	
NAME				4.2 N	NAME						
STREET ADDRESS				4.3 S	STREET AD	DRESS					
CITY-ST-ZIP					OTY-ST-2	- 1					
TITLE			☐ DELETE	5 1 1					Change	Addition	
NAME				5.2 N	NAME	-					
STREET ADDRESS				535	STRÉET AD	DRESS					
CITY-ST-ZIP					DITY-ST-2						
THTLE			DELETE	6.11					Change	Addition	***
NAME				62 N	NAME						
STREET ADDRESS				635	STREET AD	DRESS					
CITY-ST-ZIP				640	CHTY - ST - I	ZIP					
14. I do hereby	y certify that the information supplied	with this	filing is voluntarily furni	ished and	does r	not qualify fo	r the exemption stated in Section 119.	07(3)(k), FI	orida Statut	ies. I further	

roo hereby certify that the information supplied with this falling is voluntarily turnished and does not quarify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Further certify that the information indicated on this annual report is supplemental annual report is true and accurate and that my signature shell 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 in Block 12 or Block 13 if changed, or on a machinent with an address.

SIGNATURE: :

SIGNITURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN EVERETT 4/30/96407-588-9411

Date

Daytime Phone #