

MAY 1ST IS \$550.00

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra S. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 APR 29 AM 9:28

DOCUMENT # 543583
1. Corporation Name
SUNRISE AUTO SALVAGE, INC.

(9)

Principal Place of Business
18989 E COLONIAL DRIVE
ORLANDO FL 32820

Mailing Address
18989 E COLONIAL DRIVE
ORLANDO FL 32820

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1977

4. FEI Number

59-2198772

Applied For
Not Applicable

5. Certificate of Status Desired

☒

\$9.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30

☐

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

SALEHI, MAJID
18989 E COLONIAL DRIVE
ORLANDO FL 32820

10. Name and Address of New Registered Agent

81 Name

HOWARD SKLAR

82 Street Address (P.O. Box Number is Not Acceptable)

3400 JOHN ANDERSON DRIVE

83

ORMOND BEACH FL 32176

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Howard Sklar Pres.

(NOTE: Registered Agent signature required when registering)

DATE

6-26-98

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
SKLAR, HOWARD L.
18989 E COLONIAL DRIVE
ORLANDO FL 32820

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

HOWARD SKLAR
3400 JOHN ANDERSON DRIVE
ORMOND BEACH FL 32176

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

HOWARD SKLAR
P.O. Box 280
FLAGLER BEACH FL 32136

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

500002866155-16
-05/07/99-01009-017
****450.00 ****150.00

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

780
4/29/99

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6-20-98 904 445-4081
4-28-99 904 4454081

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4-14-98 (407) 568-8444
Date Daytime Phone # 0101008

☐ DELETE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Howard Sklar Pres.
Howard Sklar Pres.

4-14-98

(407) 568-8444

6-20-98

904 445-4081

4-28-99

904 4454081

CR2004 (10/97)