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

Mailing Address

KEY WEST FL 33040

200 GREENE ST

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 633131**

1. Corporation Name SALVORS, INC.

Principal Place of Business

200 GREENE ST

KEY WEST FL 33040

**FILED** May 06, 1999 8:00 am Secretary of State

05-06-1999 90305 005 \*1,050.00



Suite, Apt. #, etc. 27 28 28 27 29 27 30 5. Certificate of Status Desired					DO NOT WAITE IN THIS SEA	10E	
2. Principal Place of Business   2a. Mailing Address   59:2011502   Section For For Assister   25   Suite, Apt. #, etc.   25   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   28   City & State   6. Election Campaign Financing   58.75 Addition   Fen Required   28   Zip   Country   27   Country   28   This copporation owes the current year intangolist   City & State   28   Zip   Zip							
Solid, Apt. 8, etc.    26	2. Principal Pl	ace of Business	2a. Mailing Address			Applied For	
Suite, Apt. #, etc. 27 28 28 27 29 27 30 5. Certificate of Status Desired	21		26		59-2011502	Not Applicable	
City & State  Ci				· -	5 Contitonin of Status Decimal	8.75 Additional	
City A State    City A State   City	22				5. Certificate of Status Desired	Fee Required	
Added to Fees    20	City & State City & State		-	6. Election Campaign Financing	\$5.00 May Be		
3. Name and Address of Current Registered Agent  FISHER, MELVIN A 200 GREENE ST KEY WEST FL 33040  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florids Statutes.  12. Street Address y P. O. Box Number is Not Acceptable.  20. O. Greene St. KEY West fr. I. 33040  14. City  FL   35   Zip Code  44. City  FL   33040  15. Name Address of New Registered Agent  16. Name Address of New Registered Agent  17. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florids 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, and the provisions of Section 607,0502 and 607,1508, Florids Statutes.  SIGNATURE  15. COPFIGERS AND DIRECTORS  16. ADDITIONS/CHANGES TO OFFICERS ND DIRECTORS IN 12  17. OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS ND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS ND DIRECTORS IN 12  19. STREET ADDRESS OF STATE ADDRESS OF STREET	23				Trust Fund Contribution	Added to Fees	
9. Name and Address of Current Registered Agent  FISHER, MELVIN A 200 GREENE ST KEY WEST FL 33040  18. Name    Marrie	Zip	Country		¬ '			
FISHER, MELVIN A 200 GREENE ST KEY WEST FL 33040    Street Address (P.O. Box Number is Not Acceptable)	24			)	Totalian Topany Tax:		
FISHER, MELVIN A 200 GREENE ST KEY WEST FL 33040							
200 GREENE ST KEY WEST FL 33040  ***200 GREENE ST KEY WEST FL 33040  ***3 Key West , FL 33040  ***5 Line Statutes							
KEY WEST FL 33040    STOREST   STORES   Store   Store				82 Street Address (P.O. Box Number is Not Acceptable)			
Key West , FL 33040							
11. Pursuant to the provisions of Sections 607/0502 and 807/1508, 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, 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 a				63	Key West , FL 33040		
Agent I an Tamiliar with, and accept the obligations of Section DUT.000.Filtron Statutes.  SIGNATURE	ı			84 City	FL <sup>8</sup>	5 Zip Code	
Agent I an Tamiliar with, and accept the obligations of Section DUT.000.Filtron Statutes.  SIGNATURE	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
SIGNATURE Displator, hypotor or printed reason agent and the Pappication (Port Registered Agent signature received where receivables)  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PRESIDENT   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PRESIDENT   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PRESIDENT   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PRESIDENT   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PRESIDENT   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE V   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE V   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE V   Change   Addition   NAME STREET ADDRESS   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   DELETE   ADDITIONS/CHANGES TO OFFICERS AND TO OFFICERS AND TO OFFICERS AND TO OFFICERS AND TO OFFICERS ADDITIONS ADDITIONS AND TO OFFICERS ADDITIONS ADDITI	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.						
12.		King H File	(cassadent)		2/25/99		
FISHER, MELVIN A.   STREET ADDRESS   S	Signature, typed or printed harne or registered agent and tive it applicable (NOTE: Registered Agent Signature Exposed Mich. S						
FISHER, MELVIN A.  200 KEY HAVEN RD  KEY WEST FL  NAME  FISHER, KIM  FISHER, FISHER, KIM  FISHER, FISHER, KIM  FISHER, TAFFIR  FISHER  FISHER  FISHER, TAFFIR  FISHER  FISHER, TAFFIR  FISHER  FISHER, TAFFIR  FISHER  FISHER  FISHER  FISHER, FIL 33040  Change Addition  FISHER  FISHER  FISHER  FISHER, KIM  Clyne, Patrick  FISHER  FISHER  FISHER, KIM  FISHER							
STREET ADDRESS COYST.ZP KEY WEST FL  TITLE V MEST FL  TITLE V MEST FL  TITLE V MEST FL  TITLE ST  COTYST.ZP KEY WEST FL  TITLE V MEST FL  TITLE T MEDICARES CONGRESS C		•	<b>№</b> 1 DELETE			Change	
CITY-ST-ZP   KEY WEST FL	NAME			l i			
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TITLE V	·						
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CACITY CT 7/D	j			6.3 STREET ADDRESS			
	CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 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 an attachment with an address, with all other like empowered.

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