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

PROFIT CORPORATION ANNUAL REPORT

1999

775 CIDCO ROAD

COCOA FL 32926

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23

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Zip

2. Principal Place of Business

Suite, Apt. #, etc.

City & State



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 638613

25

LATHEM, DOUGLAS W.

770 CIDCO ROAD

COCOA FL 32926

COCOA AUTO SALVAGE, INC.

Principal Place of Business	Mailing Address	

775 CIDCO ROAD

COCOA FL 32926

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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9. Name and Address of Current Registered Agent

Zip

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90067 004 ***150.00

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	DO NOT WRI	IE IN IF	115 SPACE		
3.	Date Incorporated or Qualifed				
	10/04/1979				
4.	FEI Number			Applied For	
	59-1936348		П	Not Applicable	
5.	Certifcate of Status Desired		\$8.75 Additional Fee Required		
6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
8.	This corporation owes the curre Personal Property Tax.	ent year	Intangible Yes	□No	

10. Name and Address of New Registered Agent

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

idco Roac

84 85 Zip Code City

Country

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Name

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office or re	to the provisions of Sections 607.0502 are egistered agent, or both, in the State of F m familiar with, and accept the obligation	lorida. Such change was 🖘	thorized by the corporation	oration submits this statement to on's board of directors. I hereby a	incept the appointment as reg	istered
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signature required	d when reinstating)	DATE	
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	LATHEM, DOUGLAS W.		1.2 NAME			Ì
STREET ADDRESS	2580 N. COX ROAD		1.3 STREET ADDRESS			
CITY-ST-ZIP	COCOA FL		1.4 CITY-ST-ZIP			
TITLE	TD	☐ DELETE	2.1 TITLE		☐ Change	Addition (
NAME	LATHEM, LINDA S.		2.2 NAME			
STREET ADDRESS	2580 N. COX ROAD		2.3 STREET ADDRESS			
CITY-ST-ZIP	COCOA FL		2. 4 CITY-ST-ZIP			
TITLE	VSD	☐ DELETE	3.1 TITLE	-	. ☐ Change	Addition
NAME	LATHEM, STEVEN D.		3.2 NAME			
STREET ADDRESS	2580 N COX RD.		3.3 STREET ADDRESS			
CITY-ST-ZIP	COCOA FL		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4 3 STREET ADDRESS			
CITY-ST-ZIP			4 4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME		/	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADORESS			
			64 CITY ST 7ID			

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.

SIGNATURE: