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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

A-1 SALES, SERVICE & SALVAGE, INC.

Secretary of State

**FILED** 

Apr 14 1998 8:00am

rincipal Place of Business	Mailing Address	r und 100 zitt 1001 dinn dinn dinn dinn dibit diebi bidt dibit dibit 1001
% HAL G. HILL ESQ. 3044 JOE JOHNS RD	% HAL G. HILL. ESO. 3044 JOE JOHNS RD	

3044 JOE JOHNS RD 3014 JOE JOHNS RD MIDDLEBURG FL 32068			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
						04/01/1982	
	lace of Business	<b>}</b>	2a. Mailing Address			4. FEI Number	Applied For
21		2				59-2195785	Not Applicable
Suite, Apt.	#, etc.	ļ	Suite, Apt. #, etc.			Le Contingate of Status Desired (N)	.75 Additional
22		2					ee Required
City & State	Ð	ļ. <u>-</u>	City & State	•			5.00 May Be
23	T 6		8	Counti			dded to Fees
Zip 24	Cou	· -	Zip -1		y	This corporation owes or has paid the current ye     Personal Property Tax due June 30.     Yes	
[24]	25	2 dress of Current Re		30]		Personal Property Tax due June 30. Yes	
LIM	<del></del>	areas or Corrolli rio	graturo Agont	8	Na	ame	
	L, HAL G., ESQ.			Ľ			
1	14 JOE JOHNS RD			8	Str	reet Address (P.O. Box Number is Not Acceptable)	
MIR	DDLEBURG FL 320	68		8:			
				٦	[		
				8-	Cit	FL 85	Zip Code
44 Purcuant I	to the provisions of S	actions 607 0502 and	1 607 1508 Etorida Stati	ites the sho	le nec		aina its registered
● office or re	egistered agent, or b	oth, in the State of FI	orida. Such change was	authorized k	y the	med corporation submits this statement for the purpose of chan a corporation's board of directors. I hereby accept the appointme	ent as registered
	m tamiliar with, and a	accept the obligations	s of, Section 607.0505, F	-Iorida Statute	es.		
SIGNATURE	Signature, typed or printed in	mini of incorporate a post and	telo il producatilo 700	M : Panistared A	sont piece	gnature required when reinstating) DATE	
12.	э-участе, турестог ришветт	OFFICERS AND DIF		13.	Lour m.D.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	STD	S. FOLIOTHER DI	DELETE	1.1 TITLE	• • • •	ADDITIONS/CHANGES TO OFFICERS AND DIRE	
NAME	HILL, JANET T.		<b>—</b> · · · · · ·	1.2 NAME			
STREET ADDRESS	3044 JOE JOH	NS ROAD		1.3 STREE		RESS	
CITY-ST-ZIP	MIDDLEBURG F			1.4 CITY-		•	
TITLE	VD		DELETE	2.1 TITLE	O1-EIF	□ c	nange Addition
NAME	HILL, JOHN F.			2.2 NAME			_
STREET ADDRESS	3026 JOE JOH	NS RD		2.3 STREE		nree .	
CITY-ST-ZIP	MIDDLEBURG F	–		2.4 CITY			
TITLE	PD		DELETE	3.1 TITLE	J. LIF		nange
NAME	HILL HAL "G"		.—	3.2 NAME			
STREET ADDRESS	3044 JOE JOHI	NS RD		3.3 STREE		RESS	
CITY-ST-ZIP	MIDDLEBURG F			3.4. CITY			
TITLE		<del></del>	DELETE	4.1 TITLE	OI - CIL		nange
NAME			_	4. 2 NAM			
STREET ADDRESS				4.3 STREE		RESS	
CITY-ST-ZIP				4.4 CITY-		· ·	
TITLE			DELETE	5.1 TITLE	e.ir		nange Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREE		RFSS	
CITY-ST-ZIP				5.4 CITY-			
TITLE			DELETE	6.1 TITLE	01-71F		nange Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREE		BECC	
CITY ST. 7IP				C.A DITY			

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.

HAL G. HILL