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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K59665

(5)

ABC AUTO SALVAGE & RECYCLING, INC.

FILED

Apr 01 1998 8:00am

Secretary of State

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Principal Pla	ce of Business	Mailing Address	1.11.7		- 1 HADESHIE OOF GLEEN TOTA OFFICE BEING HINT BIDIT BIBIT OFF	iti minii dirti dibii 1001
2221 5TH AVE SOUTH 2221 5TH AVE SOUTH ST. PETERSBURG FL 33712 ST. PETERSBURG FL 33712						
		712		DO NOT WRITE IN THIS SP.	ACE	
					3. Date Incorporated or Qualified	
					01/17/1989	
	Place of Business	2a. Mailing Address		_	4. FEI Number	Applied For
21		26			59-2926684	Not Applicable
Suite, Apt	t #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & Sta	tle	City & State			- Flatin Compiler Flagging	
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	ry	8. This corporation owes or has paid the currer	
24	25	29	30			Yes No
	9. Name and Address of Curr	ent Registered Agent		41	10. Name and Address of New Registered Ag	ent
	LOWATSKY, DAVID] [1 Name		
20041 GULF BLVD		ε	2 Street Add	Street Address (P.O. Box Number is Not Acceptable)		
₩.	IDIAN SHORES FL 33712		- 1	3		·
			`	3		
			1	4 City	FL	85 Zip Code
44 Pursuan	I to the provisions of Sections 607 D	02 and 607 1608 Florida Statu	toe the shy	Ve-named corr		hanging its registered
agent. I SIGNATURE					poration submits this statement for the purpose of cl tion's board of directors, I hereby accept the appoin and when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D	
TITLE	P DI DIVIA DI CONTRO	☐ DELETE	1.1 TITL		L	Change Addition
NAME	GLOWASKY, DAVID		1.2 NAN			
STREET ADDRESS	5035 32ND AVE N. St. Petersburg Fl			ET ADDRESS		
CITY-ST-ZIP TITLE	31. PETENSBORG TE	DELETE	2.1 TITE	-ST-ZIP		Change Addition
NAME	ĺ		2.2 NAM		_	
STREET ADDRESS	; !		-	ET ADDRESS		
CITY-ST-ZIP			2.4 CIT	/-ST-ZIP		
TITLE		☐ DELETE	3.1 TITL			Change Addition
NAME			3.2 NAN	E]		
STREET ADDRESS	5		3.3 STA	ET ADDRESS		
CITY-ST-ZIP		T or to		r-st-zip		1 1 1 1 1 2 2
TITLE		☐ DELETE	4.1 TITE		L	_i Change
NAME			4. 2 NAI	-		
STREET ADDRESS	`{			ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.1 TITL	-ST-ZIP		Change Addition
NAME			5.2 NAN	į.	_	
STREET ADDRESS	s			ET ADDRESS		
CITY-ST-ZIP				- ST - ZIP		
TITLE		DELETE	6.1 TITL			Change Addition
NAME			6.2 NAM	E		
STREET ADDRESS	5		6.3 STR	ET ADDRESS		
CITY-ST-ZIP				-\$1-ZIP		
44 I hereby	certify that the information supplied	with this filing does not qualify t	or the exer	notion stated in	Section 119 07(3)(i), Florida Statutes. I further certi ure shall have the same legal effect as if made unde	by that the information