2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112506

Entity Name: P & S AUTO SALVAGE, INC.

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3750 VERONICA SHOEMAKER BLVD FT MYERS, FL 33916 **Current Mailing Address: New Mailing Address:** 3750 VERONICA SHOEMAKER BLVD PO BOX 7587 FT MYERS, FL 33916 FT MYERS, FL 33911 FEI Number: 56-2526042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SWAN, LAWRENCE SWAN, LAWRENCE 1749 NE 10TH TERR 709 CÁPE CORAL PKWY CAPE CORAL, FL 33909 US CAPE CORAL, FL 33914 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: LAWRENCE SWAN 01/18/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PARENT, VERDELL SR Name: Name: 3750 VERONICA SHOEMAKER BLVD Address: Address: City-St-Zip: FT MYERS, FL 33916 City-St-Zip: () Delete Title: Title: () Change () Addition Name: PARENT, LUCILLE Name: 3750 VERONICA SHOEMAKER BLVD Address: Address: FT MYERS, FL 33916 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VERDELL PARENT SR 01/18/2007 D