FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

9:15

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000027701 (0)**

1. Current Name:
GOLDCOAST AUTO SALVAGE, INC.

Current Principal Address:
2890 NW 127 ST
OPA LOCKA FL 33054

Mailing Address:
2890 NW 127 ST
OPA LOCKA FL 33054

(MUST WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: **04/15/1993**

3a. Date of Last Report: **06/21/1994**

2. Principal Office Address
21

2a. Mailing Address
26

4. FEI Number: **65-0404907** ☐ Applied For ☐ Not Applicable

Suite, Apt. # etc.
22

Suite, Apt. # etc.
27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip | County
24 | 25

Zip | County
29 | 30

8. This corporation has subsidiaries to be consolidated under S. 180.072 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DENMARK, LAURIE C
2890 NW 127 ST
OPA LOCKA FL 33054

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 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.

SIGNATURE

12. OFFICER AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (if any)
D DENMARK, LAURIE C 2890 NW 127 ST OPA LOCKA FL 33054	President ☐ Change ☐ Addition
D FLIPPEN, JAMES S 2890 NW 127 ST OPA LOCKA FL 33054	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 1, 2 or Block 12 (if changed) or on an attachment with an arabic #.

SIGNATURE: Laurie C Denmark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-10-95
Date

685-8684
Telephone Number

0101700 CP