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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600025150 (9)

AUTO WORKS SALVAGE, INC.

Principal Plac	e of Business	Mailing Address		Lientrider iff iffile eitit entit beite entit en	innt milat (183) Artet aute fühlt
836 NW 8 AV	/E	836 NW 8 AVE			
FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311			11	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	3 3 TACE
				03/21/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0658462	Not Applicable
 		Suite, Apt. #, etc.	 		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	Yes □ No
	9, Name and Address of Curren	t Registered Agent		10. Name and Address of New Registere	d Agent
	SENBERG, ARTHUR R		81 Name		
	75 N FEDERAL HWY 7TH		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33308					
}			83		
			84 City		85 Zip Code
				<u> </u>	
l office or r	egistered agent, or both, in the State	of Florida. Such change was a	authorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered pointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statutes.	, ,	-
SIGNATURE	Signature, typed or printed name of registered age	0.00	E. Registered Agent signature requ	pired when reinstating) OATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AT	
TITLE	PD	DELETE	1,1 TITLE	TOO TO TO THE OF THE PARTY OF T	☐ Change ☐ Addition
NAME	GARTNER, DANIEL A	 ·	12 NAME		- • -
STREET ADDRESS	836 NW 8 AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33311		1.4 CITY-ST-ZIP		
TITLE	SD	DELETE	2.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME	DELGADO, LYNNE		2.2 NAME		
STREET ADDRESS	836 NW 8 AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33311		2.4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			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 L Addition
NAME	†		SO NAME		

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 of the received 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 available ment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS City-St-zip

CITY ST-ZIP

NAME

Sam across. May

DELETE

DANIELG ARTNER 4/7/98

Addition

Change

FILED

Apr 16 1998 8:00am

Secretary of State