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 # HEIGHT'S AUTO SALVAGE, INC. (9)

FILED Apr 23 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address		- I INDII DIIDAI DIDII BARIC (BARI BARICI (DIA DA	ii digil didi: didil didil didil logi
-2000-18//-40-07		*2300 NW 48-8T →			
POMPANO BEACH FL 33073		POMPANO BEACH FL 33073		56 462 4607	WA 95-1-95
				DO NOT WRITE IN TH 3. Date Incorporated or Qualified	SIS SPACE
				06/18/1992	
2. Principal Place of Business		2a. Mailing Address		4, FEI Number	Applied For
	4 N.W. 484 ST	26 2300A N	M 484 21	65-0345567	Not Applicable
Suite, Apt. 4		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	•	City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	7ip	Country	8. This corporation owes or has paid the	
24	25]		80	Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Nontanan Patrick 81 Name					
MOITINIANO, FAINIUN					
POMPANO BEACH FL 33073			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
POMPANO BEACH FL 33073					
			84 City	<u> </u>	85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0502	and 607,1508, Horida Statutes		poration submits this statement for the purpos	e of changing its registered
11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registored 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. Lam familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes					
SIGNATURE Signature species protect none of registered agent and the diagramable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	MONTANARO, PATRICK L		1.2 NAME		
STREET ADDRESS	2000 NW 48-ST		1.3 STREET ADDRESS 2	TE MBS WH A COE	
CITY-ST-ZIP	POMPANO BEACH FL		14 CITY-S1-ZIP		
TITLE	D	☐ DELFTE	2 1 TITLF		Change Addition
NAME	MONTANARO, JOSEPHINE		2.2 NAME		
STREET ADDRESS	2300 NW 48 6T			TO WASS WH Adol	
CITY-ST-ZIP	POMPANO BEACH FL	DELFTE	2. 4 CITY - ST - ZIP		The state of the s
NAME		ר] הנורני	3.1 TITLE		Change Addition
			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4 CHY-ST-ZIP 4.1 TILE		Change Addition
NAME			4. 2 NAME		Change Chyantian
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CRY-SI-ZIP		
TITLE		DELETE	51 1ITLF		Change Addition
NAME			5.2 NAME		shares
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 City - St - ZiP		-
TITLE		DELFTE	6.1 TITLE		Change Addition
NAME		- A-	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CIFY · S1 - ZIP		
44 11			B.4 5111 - 31 - 411		

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 supplienced annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 13 if chapter 607 or or an attrictment with an address.