2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # F84490

1. Entity Name
M.S.D. AUTO BODY, INC.

Principal Place of Business
2093 NE 160TH ST
NORTH MIAMI BEACH, FL 33162

Mailing Address
2093 NE 160TH ST
NORTH MIAMI BEACH, FL 33162

DO NOT WRITE IN THIS SPACE

01062005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2200894

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

TEVINI, HELMUT
2093 NE 160TH STREET
NORTH MIAMI BEACH, FL 33162

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Date

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TEVINI, HELMUT
STREET ADDRESS	2093 NE 160TH STREET
CITY ST ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	STD
NAME	TEVINI, LYDIA
STREET ADDRESS	2093 NE 160TH ST
CITY ST ZIP	NORTH MIAMI BEACH, FL 33162
TITLE	T
NAME	TEVINI, SEPP
STREET ADDRESS	2093 NE 160TH ST
CITY ST ZIP	MIAMI, FL 33162
TITLE	D
NAME	TEVINI, TYLA
STREET ADDRESS	2093 NE 160TH ST
CITY ST ZIP	MIAMI, FL 33162
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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01/10/05-80009-023 150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with a title like empowered.

SIGNATURE: Lydia Tevini 1/6/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date