

2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 11, 2008
Secretary of State**

DOCUMENT# F84490

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

Current Principal Place of Business:

2093 NE 160TH ST
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

2093 NE 160TH ST
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 59-2200894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TEVINI, HELMUT
Address: 2093 NE 160TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: STD () Delete
Name: TEVINI, LYDIA
Address: 2093 NE 160TH ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: T () Delete
Name: TEVINI, SEPP
Address: 2093 NE 160TH ST
City-St-Zip: MIAMI, FL 33162

Title: D () Delete
Name: TEVINI, TYLA
Address: 2093 NE 160TH ST
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. 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: TYLA TEVINI

D

01/11/2008

Electronic Signature of Signing Officer or Director

_____ Date