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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K42114 (4)
1. Corporation Name
AUTO PAINTING U.S.A. BODY REPAIR CENTERS, INC. O
F WEST MIAMI

Principal Place of Business
8111 GARDEN ROAD
UNIT K
WEST PALM BEACH FL 33404

Mailing Address
8111 GARDEN ROAD
UNIT K
WEST PALM BEACH FL 33404-1751



3. Date Incorporated or Qualified 10/25/1988
3a. Date of Last Report 05/01/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0083603		Applied For Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 Zip Country		28 Zip Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
24		25		29		30	

9. Name and Address of Current Registered Agent

SAPIR, M R
222 LAKEVIEW AVE SUITE 1400
SUITE 1200
WEST PALM BEACH FL 33401

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	KOBUS, THOMAS			1.2 NAME			
STREET ADDRESS	8111 GARDEN ROAD, UNIT K			1.3 STREET ADDRESS			
CITY-ST-ZIP	W. PALM BEACH FL			1.4 CITY-ST-ZIP			
TITLE	S	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	KOBUS, KATHLEEN			2.2 NAME			
STREET ADDRESS	8111 GARDEN RD UNIT K			2.3 STREET ADDRESS			
CITY-ST-ZIP	WPB FL			2.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	CASASNOVAS, CLAUDIO			3.2 NAME			
STREET ADDRESS	8111 GARDEN RD UNIT K			3.3 STREET ADDRESS			
CITY-ST-ZIP	WPB FL			3.4 CITY-ST-ZIP			
TITLE	T	☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	ROBERTS, PATRICIA			4.2 NAME			
STREET ADDRESS	8111 GARDEN RD UNIT K			4.3 STREET ADDRESS			
CITY-ST-ZIP	WPB FL			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 or the receiver 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 an attachment with an address.

SIGNATURE: K. Roberts

4/11/97 511-813-1013

CR2E034 (9/96)