2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

K49733 DOCUMENT

1. Entity Name

CAR BODY CONCEPTS, INC.



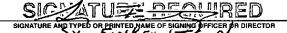
FILED Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90243 038 ***150.00

Principal Place of Business 8500 NW 96ST. MEDLEY FL 33166		Mailing Address 9970 N.W. 89TH COURT MEDLEY FL 33178			L		e see a			
US	,	US								
2. Principal F	Place of Business	3. Mai	3. Mailing Address						110 1114 1111	
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State		City	City & State			4.	65-108/219		oplied For ot Applicable]
Zip Country		Zip	Zip Co		untry 5		Certificate of Status Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Curren	t Registere	ed Agent			7, 1	Name and Address of New Registered	Agent		1
					Name		,			
	ATION SERVICE COMPANY S STREET					Street Address (P.O. Box Number is Not Acceptable)				
TALLAHAS	SSEE FL 32301									1
					City		F	Zip Cod	le	1
	e named entity submits this statement tions of registered agent.	for the purp	ose of changing its	registere	ed office or regis	stered ag	gent, or both, in the State of Florida. I an	familiar with,	and accept	
SIGNATURE										
0.0.0.0.0.0	Signature, typed or printed name of registered ager	nt and title if app	olicable. (NOTE	E: Registere	d Agent signature requ	ired when re	einstating) DATE			1
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o		State				Election Campaign Financing Trust Fund Contribution.		May Be d to Fees	
10.	OFFICERS AND DIRECTORS			11.			L DDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 11	1
TITLE	P.		☐ Delete					Change	Addition	18
NAME	HOGARTY, CHARLES J			NAM	•					1
STREET ADDRESS	9970 N.W. 89TH COURT MEDLEY FL 33178				ET ADDRESS - ST- ZIP					3
CITY-ST-ZIP				THTLE				Change	Addition	1 5
title Name	VP PALUMBO, JOHN				E E			☐ Change	Audition	3
STREET ADDRESS	9970 N.W. 89TH COURT			1	ET ADDRESS					
CITY-ST-ZIP	MEDLEY FL 33178			.∴ • –CITY.	=ST-ZIP					
TITLE	T		☐ Delete	TITLE	Ē			☐ Change	☐ Addition	
NAME	FINKELSTEIN, SY			NAM						
STREET ADDRESS CITY-ST-ZIP	9970 N.W. 89TH COURT				ET ADDRESS - ST-ZIP					
······	MEDLEY FL 33178							☐ Change	Addition	1
title Name			☐ Delete	. TITLE			•	☐ Onlange	☐ vacuon	
STREET ADDRESS					ET ADDRESS		.÷			
CITY-ST-ZIP				CITY	-ST-ZIP					
TITLE	`		· Delete	TITLE				Change	☐ Addition	
NAME			i	NAM						
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				-	-ST-ZIP					-
TITLE			☐ Delete	TITLE	1			☐ Change	Addition	
Name Street address				NAM	E ET ADDRESS					
CITY-ST-ZIP					-ST-ZIP					

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 all other like empowered.

SIGNATURE:



305-863-7537