

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # K86429

1. Entity Name
A-RELIABLE PAINT & BODY, INC.



Principal Place of Business
**775 S HANSEL ST
PENSACOLA, FL 32505**

Mailing Address
**775 S HANSEL ST
PENSACOLA, FL 32505**



04282004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2992232

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LAVALLEE, PAUL R.
775 S HANSEL ST
PENSACOLA, FL 32505**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LAVALLEE, PAUL R.
STREET ADDRESS	751 HOLSBERY PLACE
CITY-ST-ZIP	PENSACOLA, FL
TITLE	D
NAME	LAVALLEE, DEBRA C.
STREET ADDRESS	751 HOLSBERY PLACE
CITY-ST-ZIP	PENSACOLA, FL
TITLE	D
NAME	LAVALLEE, ROBERT W.
STREET ADDRESS	2491 RYALE ROAD
CITY-ST-ZIP	CANTONMENT, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000143105
04/30/04-80078-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Paul R. Lavallee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28 April 04
Date

850-479-7799
Daytime Phone #