

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033236

FILED
Jan 28, 2004
Secretary of State

Entity Name: HATZI AUTOMOTIVE APPEARANCE SPECIALISTS, INC.

Current Principal Place of Business:

2000 N. FLORIDA MANGO RD.
103
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

2000 N. FLORIDA MANGO RD.
103
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 35-2163823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATZIYANNAKIS, HARRY
4202 TRANQUILITY DRIVE
HIGHLAND BEACH, FL 33487

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: PSD () Delete
Name: HATZIYANNAKIS, HARRY
Address: 4202 TRANQUILITY DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: VTD () Delete
Name: HATZIYANNAKIS, CLIO
Address: 4202 TRANQUILITY DRIVE
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: HARRY HATZIYANNAKIS

PSD

01/28/2004

Electronic Signature of Signing Officer or Director

_____ Date