

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000078260

FILED
Apr 29, 2005
Secretary of State

Entity Name: THE BETTER BODY SHOP & USED CAR FACTORY, INC.

Current Principal Place of Business:

601 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

501 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0450634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBIG, WOLFGANG
601 AIRPORT RD., SOUTH
NAPLES, FL 34104 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: LIEBIG, THOMAS
Address: 254 GULF SHORE BLVD. SOUTH
City-St-Zip: NAPLES, FL 34102 US

Title: VD () Delete
Name: LIEBIG, WOLFGANG
Address: 1111 GALLEON DR
City-St-Zip: NAPLES, FL 34102 US

Title: T () Delete
Name: SCHMIDT, JAMES M
Address: 2285 CAPRI CT
City-St-Zip: NAPLES, FL 34105 US

Title: SD () Delete
Name: KROUT, HAROLD E JR.
Address: 521 31ST STREET SW
City-St-Zip: NAPLES, FL 34117

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 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: HAROLD E KROUT JR

S

04/29/2005

Electronic Signature of Signing Officer or Director

Date