

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000031256

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: 1ST REQUEST AUTO TOUCH UP & PAINT REPAIR, INC.

**Current Principal Place of Business:**

696 LINVILLE FALLS DR.  
WEST MELBOURNE, FL 32904 US

**New Principal Place of Business:**

**Current Mailing Address:**

696 LINVILLE FALLS DR.  
WEST MELBOURNE, FL 32904 US

**New Mailing Address:**

FEI Number: 59-3449122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HANSEN, GERALD  
696 LINVILLE FALL DRIVE  
WEST MELBOURNE, FL 32904 US

**Name and Address of New Registered Agent:**

HANSEN, GERALD L P  
696 LINVILLE FALL DRIVE  
WEST MELBOURNE, FL 32904 US

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: GERALD L. HANSEN

04/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HANSEN, GERALD L  
Address: 696 LINVILLE FALL DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: V ( ) Delete  
Name: HANSEN, ANA MARIA  
Address: 696 LINVILLE FALL DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

**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 Chapter 119, 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: ANA MARIA HANSEN

V

04/04/2006

Electronic Signature of Signing Officer or Director

Date