2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # K67723

1. Entity Name
MIAMI PAINT & BODY SHOP CORP.

Principal Place of Business
% WALKYRIA HERRERA
3423 NW 36TH STREET
MIAMI, FL 33142

Mailing Address
% WALKYRIA HERRERA
3423 NW 36TH STREET
MIAMI, FL 33142

DO NOT WRITE IN THIS SPACE

02242006 No Chg-P CRZE034 (11/05)

4. FEI Number 65-0142227 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

HERRERA, WALKYRIA
3423 NW 36TH STREET
MIAMI, FL 33142

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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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HERRERA, WALKYRIA
STREET ADDRESS	3423 NW 36TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	HERRERA, WALKYRIA
STREET ADDRESS	3423 NW 36 STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	ST
NAME	BERMUDEZ, LUIS
STREET ADDRESS	3423 NW 36TH ST
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: (WALKYRIA M. HERRERA) 4/12/06 305-634-7035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #