2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# 649273

Entity Name: SALEMI'S BODY SHOP, INC.

Current Principal Place of Business:

1602 N. ARMENIA AVENUE
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1602 N. ARMENIA AVENUE
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-1961626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALEMI, SAM
1602 N. ARMENIA AVENUE
TAMPA, FL 33607 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: P ( ) Delete
Name: SALEMI, SAM, JR,
Address: 7903 GOLDEN GLEN
City-St-Zip: TAMPA, FL 00000,

Title: VD ( ) Delete
Name: SALEMI, SAM, SR,
Address: 8306 TERRACE WOOD CIRCLE
City-St-Zip: TAMPA, FL 00000,

Title: ST ( ) Delete
Name: SALEMI, GRACE,
Address: 8306 TERRACE WOOD CIRCLE
City-St-Zip: TAMPA, FL 00000,

Title: V ( ) Delete
Name: RUSSO, PATRICIA
Address: 16315 NORWOOD DRIVE
City-St-Zip: TAMPA, FL

Title: V ( ) Delete
Name: ILER, SANDRA
Address: 5403 WINHAWK WAY
City-St-Zip: LUTZ, FL 33558

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SAM SALEMI, JR. P 01/15/2008

Electronic Signature of Signing Officer or Director — Date