

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 05, 2008 8:00 am**  
**Secretary of State**

03-05-2008 90027 020 \*\*\*150.00

|   |   |
|---|---|
| DOCUMENT # P06000145406                                   |  |
| 1. Entity Name<br>BODY DETAILS - PALM BEACH GARDENS, INC. |   |

|   |   |
|---|---|
| Principal Place of Business<br>3309 PONCE DE LEON BLVD.<br>CORAL GABLES, FL 33134 | Mailing Address<br>3309 PONCE DE LEON BLVD.<br>CORAL GABLES, FL 33134 |
|---|---|



01182008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

|   |                                |
|---|--------------------------------|
| 4. FEI Number<br>20-5988655                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

|   |                                   |
|---|-----------------------------------|
| 6. Name and Address of Current Registered Agent<br><br>BALLEJO, BRYAN<br>3691 TURTLE RUN BLVD #437<br>CORAL SPRINGS, FL 33067 | <b>DO NOT WRITE IN THIS SPACE</b> |
|---|-----------------------------------|

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

|   |  |
|---|--|
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2008 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |
|---|--|

| 10. OFFICERS AND DIRECTORS                         |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | T<br>KORNFELD, RUBEN<br>607 GASMERE ROAD<br>MAHWAH, NJ 07430                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | VCOO<br>BALLEJO, BRYAN<br>3691 TURTLE RUN BLVD #437<br>CORAL SPRINGS, FL 33067   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | AD<br>BALLEJO, BRYAN<br>3691 TURTLE RUN BLVD #437<br>CORAL SPRINGS, FL 33067     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | PCEO<br>SORRENTINO, CLAUDIO V<br>5510 PACIFIC BLVD. #118<br>BOCA RATON, FL 33433 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>SORRENTINO, CLAUDIO V<br>5510 PACIFIC BLVD #118<br>BOCA RATON, FL 33433     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | S<br>SORRENTINO, NANDO<br>3180 S. OCEAN DRIVE #1009<br>HALLANDALE, FL 33009      |

**DO NOT WRITE IN THIS SPACE**

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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_