# I hereby 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 all other like empowered.

# SIGNATURE: OSCAR D RUA

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

# 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P10000100548

Entity Name: TRICOLOR AUTO & BODY, INC

#### **Current Principal Place of Business:**

6525 SOUTHERN BLVD BAY 13 WEST PALM BEACH, FL 33413

# **Current Mailing Address:**

6525 SOUTHERN BLVD BAY 13 WEST PALM BEACH, FL 33413

## FEI Number: 27-4324133

# Name and Address of Current Registered Agent:

RUA, OSCAR 239 PINE HOV CIRCLE B2 GREENACRES, FL 33463 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:

 Electronic Signature of Registered Agent

 Officer/Director Detail :

 Title
 P
 Title
 T

 Name
 RUA, OSCAR
 Name
 RESTREPO, NIDIA

Name	RUA, OSCAR	Name	RESTREPO, NIDIA
Address	239 PINE HOV CIRCLE #B2	Address	815 SKY PINE WAY APT F2
City-State-Zip:	GREENACRES FL 33463	City-State-Zip:	GREENACRES FL 33415

FILED Jun 21, 2020 Secretary of State 6184681830CC

Certificate of Status Desired: No

06/21/2020

Date