## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #339952 FILED** 1. Entity Name Aug 21, 2008 08:00 AM Secretary of State GREG'S BODY & PAINT SHOP, INC. Principal Place of Business Mailing Address 1225 OLD OKEECHOBEE ROAD 1225 OLD OKEECHOBEE ROAD WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 06242008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1236118 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RATZ.GREGORY DO NOT WRITE 5200 N. DIXIE WEST PALM BEACH, FL 33409 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWIII FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 OFFICERS AND DIRECTORS 10. TITLE RATZ, GREGORY NAME STREET ADDRESS 5200 N. DIXIE WEST PALM BEACH, FL CITY-ST-ZIP TITLE U000000958083 SCHMIDT, LIESELOTTE NAME 08/21/08-80002-011 150.00 STREET ADDRESS 1225 OKEECHOBEE ROAD CiTY-ST-ZIP WEST PALM BEACH, FL TITLE RATZ: JAMES NAME STREET ADDRESS 1225 OKEECHOBEE ROAD DO NOT WRITE CITY-ST-ZIP WEST PALM BEACH, FL TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date S ROTZ Date Dayline Phone 4

12. I hereby certify that the information supplied with this filling 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,