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Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90130 049 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 612901

1. Corporation Name

B & S BODY SHOP, INC.



Principal Place of Business

3261 PHILIPS HWY
JACKSONVILLE FL 32207
US

Mailing Address

3261 PHILIPS HWY
JACKSONVILLE FL 32207
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1979

4. FEI Number

59-1907887

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

9. Name and Address of Current Registered Agent

WYATT, SHEPHERD
2109 MARTIN STREET
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name Scheider, Lewis
82 Street Address (P.O. Box Number is Not Acceptable)
3261 Philips Hwy.
83
84 City Jax. FL 85 Zip Code 32207

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Lewis H. Scheider
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Lewis H. Scheider / President 4/09/99

12. OFFICERS AND DIRECTORS

T
NAME SCHEIDER, BETTY
STREET ADDRESS 3261 PHILIPS HWY
CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ DELETE

P
NAME SCHEIDER, LEWIS
STREET ADDRESS 3261 PHILIPS HWY
CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ DELETE

D
NAME SCHEIDER, TENESA
STREET ADDRESS 2109 MARTIN STREET
CITY-ST-ZIP JACKSONVILLE FL ☒ DELETE

S
NAME ANDERSON, BELINDA
STREET ADDRESS 3261 PHILIPS HWY
CITY-ST-ZIP JACKSONVILLE FL 2207 ☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Director
3.2 NAME Scheider, Lewis II
3.3 STREET ADDRESS 3261 Philips Hwy.
3.4 CITY-ST-ZIP Jax., FL 32207 ☐ Change ☒ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lewis H. Scheider
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)