

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 651223

FILED
Feb 10, 2009
Secretary of State**Entity Name:** R. & H. PAINT & BODY SHOP, INC.**Current Principal Place of Business:**17424 SW 245 TERRACE
HOMESTEAD, FL 33031**New Principal Place of Business:****Current Mailing Address:**17424 SW 245 TERRACE
HOMESTEAD, FL 33031**New Mailing Address:****FEI Number:** 59-1957016**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HERNANDEZ, JR., REINALDO
17424 SW 245 TERRACE
HOMESTEAD, FL 33031 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**OFFICERS AND DIRECTORS:****Title:** VP () Delete
Name: HERNANDEZ, REYNALDO, (JR)
Address: 17424 SW 245 TERRACE
City-St-Zip: HOMESTEAD, FL 33031**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: HERNANDEZ, REYNALDO, (JR)
Address: 17424 SW 245 TERRACE
City-St-Zip: HOMESTEAD, FL 33031**Title:** VP () Change (X) Addition
Name: CARRO-HERNANDEZ, HILDA
Address: 17424 S.W. 245 TERRACE
City-St-Zip: HOMESTEAD, FL 33031

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: HILDA CARRO-HERNANDEZ

VP

02/10/2009

Electronic Signature of Signing Officer or Director_____
Date