

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000033

FILED
Jan 08, 2006
Secretary of State

Entity Name: MICHAEL'S COLLISION TECHNICIANS, INC.

Current Principal Place of Business:

P.O. BOX 13013
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

572 ANCHORAGE DRIVE
NORTH PALM BEACH, FL 33408

Current Mailing Address:

P.O. BOX 13013
NORTH PALM BEACH, FL 33408

New Mailing Address:

572 ANCHORAGE DR
NORTH PALM BEACH, FL 33408

FEI Number: 86-0587663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEIVES, MICHAEL J
572 ANCHORAGE DRIVE
NORTH PALM BEACH, FL 33408 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MEIVES, MICHAEL J
Address: P.O. BOX 13013
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MEIVES, MICHAEL J
Address: 572 ANCHORAGE DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL MEIVES

PRES

01/08/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date