

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F77016

FILED  
Mar 01, 2010  
Secretary of State

Entity Name: GONZ COLLISION CENTER, INC.

**Current Principal Place of Business:**

1401 N. DIXIE HWY.  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

1401 N. DIXIE HWY.  
LAKE WORTH, FL 33460

**New Mailing Address:**

FEI Number: 59-2204412      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GONZALEZ, ROBERT I.  
2311 EDGEWATER TERRACE  
WEST PALM BEACH, FL 33406      US

**Name and Address of New Registered Agent:**

GONZALEZ, ROBERT I.  
7603 PINE TREE LANE  
WEST PALM BEACH, FL 33406      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

03/01/2010

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: GONZALEZ, ROBERT I  
Address: 1401 N DIXIE HWY  
City-St-Zip: LAKE WORTH, FL 33460

Title: VP  
Name: GONZALEZ, CARMEN  
Address: 1401 N DIXIE HWY  
City-St-Zip: LAKE WORTH, FL 33460

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: ROBERT I GONZALEZ

Electronic Signature of Signing Officer or Director

PVST

03/01/2010

Date