COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. MOUNT DUE ON OR BEFORE 09/15/99: \$550 (if DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Sep 07, 1999 8:00 am Secretary of State

09-07-1999 90007 027 ***550.00

1999 OCUMENT # H2634

Corporation Name

BODY	SHOP	BY	GARY	MCGEE,	INC
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cipal Place	e of Business	Mailing Address				Treeser Bits have sires little steel that sight along sight	,,
SW 17TH AVENUE - 782 SW 17TH AVEN		% Gary D. McGee 782 SW 17TH AVENU Delray Beach FL 3				DO NOT WRITE IN THIS SPACE	
.HA! DEAU	U LF 29444	DELINI DEMONIFE S	J 444	•		3. Date Incorporated or Qualified	
						10/19/1984	- 1
Principal P	ace of Business	2a. Mailing Address				4. FEI Number Applied For	\neg
		26	•			59-2494598 Not Applicable	е
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional	
' ' ' '		27	27			5. Certificate of Status Desired Fee Required	
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be	\Box
		28			_	Trust Fund Contribution Added to Fees	
ip.	Country	Zip	Country			8. This corporation owes the current year	
	25	29	30			Intangible Personal Property Yes No	
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registered Agent	_
				81	Name		
	gee, gary d. Sw 17th Avenue			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	_
DEL	RAY BEACH FL 33444			83			
				84	City	FL 85 Zip Code	Ī
office or a	to the provisions of sections 607.0 registered agent, or both, in the Sta um familiar with, and accept the ob	ate of Florida. Such change w	as authorized	d by	the corpora	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
	Signature, typed or printed name of registered a	gent and title if applicable.		red Ag	ent signature n	required when reinstating) DATE	4
		AND DIRECTORS	13.		,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-
j	DP	DELETÉ			ļ	Change Addition	١
]	MCGEE, GARY D.		1.2 NAME				
ET ADDRESS	782 SW 17TH AVE			1.3 STREET ADDRESS			
ST-ZIP	DELRAY BEACH FL		1.4 CIT		ZIP		-
	-	DELETE			-	Change Addition	١
			2.2 NA				
TADDRESS					ADDRESS		
ST-ZIP		<u> </u>	2.4 CIT 3.1 TIT		ZIP		\dashv
		DELETE	3,1 III 3,2 NA			L Change L Addition	1
					ADDRESS		ı
T ADDRESS (3.4 CIT		1		-
ST-ZIP		DE STE		_	211	Change Addition	\dashv
Į		L DELETE	4.1 III				•
T 4000500					ADDRESS		
T ADDRESS			4.4 CIT		- 1		
T-ZiP		DELETE			ZIF	☐ Change ☐ Addition	\exists
		I''' DELETE	5.2 NA			Change Addition	
T ADDRESS	,				ADDRESS		
			5.4 Cf1				
T-ZIP		DELETE			-17	Change Addition	\exists
		DELETE	6.2 NA			Change D Addison	
TADDRESS					ADDRESS		
1 ADDAE33			6.4 Ct		- 1		-

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.

GNATURE:

GARYD MIGER

<u>7-3-9 9-561-278-227</u>7

CK2E034 (5/99)