

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2004 08:00 AM
Secretary of State

DOCUMENT # J49689	
1. Entity Name BRYANT'S BODY SHOP, INC.	



Principal Place of Business 1037 CAPITAL CIRCLE, N.W. TALLAHASSEE, FL 32304	Mailing Address 1037 CAPITAL CIRCLE, N.W. TALLAHASSEE, FL 32304
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02062004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2753548	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BRYANT, LARRY A 1037 CAPITAL CIRCLE, N.W. TALLAHASSEE, FL 32304	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000051436 02/16/04-80051-017 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BRYANT, LARRY A 1037 CAPITAL CIRCLE, N.W. TALLAHASSEE, FL 32304
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPST BRYANT, LARRY A 1037 CAPITAL CIRCLE, N.W. TALLAHASSEE, FL 32304
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Larry A. Bryant</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: 2-12-04	Daytime Phone #: 850-574-1546
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