2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 21, 2004 8:00 am Secretary of State 04-21-2004 90121 001 ***900 00 DOCUMENT # K00841 BODY BEAUTIFUL COLLISION, INC. Principal Place of Business Mailing Address 125 N 46TH AVE 125 N 46TH AVE **66413548** HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 No Cha-P CR2E034 (10/03) 01132004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0011991 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GOTTLIEB, BRUCE M. ESQ. 125 NORTH 46TH AVE. HOLLYWOOD, FL 33021 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ST. AUBIN, ROBERT JR. 125 NORTH 46TH AVE STREET ADDRESS HOLLYWOOD, FL CITY-ST-ZIP ST. AUBIN, ROBERT JR. NAME STREET ADDRESS 125 NORTH 46 AVE HOLLYWOOD, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS City-ST-ZiP TITLE NAME STREET ADDRESS CITY-ST-7IP NAME STREET ADDRESS

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.

NIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED