

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # K67723	
1. Entity Name MIAMI PAINT & BODY SHOP CORP.	

Principal Place of Business % WALKYRIA HERRERA 3423 NW 36TH STREET MIAMI, FL 33142	Mailing Address % WALKYRIA HERRERA 3423 NW 36TH STREET MIAMI, FL 33142
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DO NOT WRITE IN THIS SPACE



02242006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0142227	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**HERRERA, WALKYRIA
3423 NW 36TH STREET
MIAMI, FL 33142**

**DO NOT WRITE
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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERRERA, WALKYRIA 3423 NW 36TH ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERRERA, WALKYRIA 3423 NW 36 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BERMUDEZ, LUIS 3423 NW 36TH ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/01/06-60068-023 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Walkyria M. Herrera (WALKYRIA M. HERRERA) 4/12/06 305-634-7035

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fees

Daytime Phone #