2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K71668

Entity Name
 OLIVER'S PAINT & BODY SHOP, INC.



FILED Mar 11, 2004 08:00 AM Secretary of State

Principal Place of Business

% OLIVER L. MERTENS 1405 LOOKOUT TERRACE MELBOURNE, FL 32901 Mailing Address

% OLIVER L. MERTENS 1405 LOOKOUT TERRACE MELBOURNE, FL 32901



NOT MOTE IN THIS COACE

SIGNATURE AND TYPEO OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

DO	NOT	WRITE	IN	THIS	SPACE
_					

01142004	No Chg-P	CR2E034 (10/	(03)
4. FEI Number		1	Applied For
59-2934	748	Γ	Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MERTENS, OLIVER L. 1405 LOOKOUT TERRACE MELBOURNE, FL 32901

SIGNATURE:

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. It am familiar with, and accept the obligations of registered agent								
SIGNATURE Signature injust or printed name of registered agent and title diapplicable (NOTE Registered Agent signature required when renstating) DATE								
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Fini Trust Fund Contribution		\$5.00 May Be Added to Fees				
16.	OFFICERS AND DIREC	TORS			<u> </u>			
TITLE NAME STREET ADDRESS CITY ST ZIP	D MERTENS, OLIVER L. 1405 LOOKOUT TERRACE MELBOURNE, FL				000000084837 03/11/04-80023-022 150.00			
DITLE NAME SIREET ADDRESS OUTY ST ZIP								
TITLE NAME STREET ADDRESS CITY ST 2P				DO	NOT WRITE			
title Name Street Address City-St. Zip				IN .	THIS SPACE			
THLE NAME STREET ADDRESS CIFY ST ZIP	-							
TITLE HAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Floods 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.								