

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION-
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1997, AMENDED

FILED
Jul 25 1997 8:00am
Secretary of State

DOCUMENT # MO7640

1. Corporation Name

JULIO PAINT & BODY SHOP, INC.

Principal Place of Business

Mailing Address

3801 N.W. 32 Avenue
Miami, Florida 33142

2. Principal Place of Business

2a. Mailing Address

11 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
11/13/84

3a. Date of Last Report
05/07/97

4. FEI Number
59-2483738

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

Campos, Eduardo

82 Street Address (P.O. Box Number is Not Acceptable)

3801 N.W. 32 Avenue

83

84 City

Miami

FL

85 Zip Code

33142

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

July 16, 1997

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

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE President/Director
NAME Guzman, Benito
STREET ADDRESS 3801 N.W. 32 Ave.
CITY-ST-ZIP Miami, FL. 33142

DELETE

TITLE Sec/Treas/Director
NAME Guzman, Haydee
STREET ADDRESS 3801 N.W. 32 Ave.
CITY-ST-ZIP Miami, FL. 33142

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/Director
1.2 NAME Campos, Eduardo
1.3 STREET ADDRESS 6420 S.W. 8th St.
1.4 CITY-ST-ZIP Miami, FL. 33155

Change Addition

2.1 TITLE Sec./Treas/Director
2.2 NAME Campos, Alina, C.
2.3 STREET ADDRESS 6420 S.W. 8th St.
2.4 CITY-ST-ZIP Miami, FL. 33155

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: (Eduardo Campos, Pres.)

7/16/97

265 361 1660

CF2E034 (3/96)