2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# M42141

Entity Name: AUTO PAINTING U.S.A. BODY REPAIR CENTERS, INC. OF LAUDERDALE LAKES

Current Principal Place of Business:

2784 N.W. 31ST ST.
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

3582 OLD LIGHTHOUSE CIRCLE
WELLINGTON, FL 33414

New Mailing Address:

11271 REGATTA LANE
WELLINGTON, FL 33467 US

FEI Number: 59-2735605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOBUS, THOMAS J
3582 OLD LIGHTHOUSE CIRCLE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

KOBUS, THOMAS J
11271 REGATTA LANE
WELLINGTON, FL 33467 US

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.

SIGNATURE: THOMAS J KOBUS 04/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KOBUS, THOMAS,
Address: 3582 OLD LIGHTHOUSE CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: S ( ) Delete
Name: KOBUS, KATHLEEN
Address: 3582 OLD LIGHTHOUSE CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: V ( ) Delete
Name: CASANOVAS, CLAUDIO
Address: 3582 OLD LIGHTHOUSE CIRCLE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KOBUS, THOMAS,
Address: 11271 REGATTA LANE
City-St-Zip: WELLINGTON, FL 33467 US

Title: S (X) Change ( ) Addition
Name: KOBUS, KATHLEEN
Address: 11271 REGATTA LANE
City-St-Zip: WELLINGTON, FL 33467 US

Title: V (X) Change ( ) Addition
Name: CASANOVAS, CLAUDIO
Address: 11271 REGATTA LANE
City-St-Zip: WELLINGTON, FL 33467 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN KOBUS S 04/26/2004
Electronic Signature of Signing Officer or Director Date