## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE: \*

## FILED Mar 06, 2006 08:00 AM Secretary of State

				_ Secretary of State
1. Entity Nam	MENT # M50095 EZ BROTHERS BODY SHOP	, INC.		Secretary of State
Principal Plac 3492 NW 54 MIAMI, FL 3	TZ HTI	Meiling Address 3492 NW 54TH ST MIAMI, FL 33142		
C	O NOT WRITE		CE	02282006 No Chg-P
GONZALE 890 E. 101 HIALEAH,		gistered Agent		DO NOT WRITE IN THIS SPACE
the abligate	named entity submits this statement for the ions of registered agent.  Signature, typed or printed name of registered agent and E NOWILL FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	iffe if eppircable. INOTE. Registers  9. Election Campaign Finar	d Agent signature required	ored agent, or both, in the Stale of Florida. I am familiar with, and accepted when reinstatings DATE  5.00 May Be and to Fees
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PSD GONZALEZ, NELSON 890 E. 10TH AVE. HIALEAH, FL 33010	PECTORS		000000456507 03/16/06-80028-017 150.00 DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS				

12. Thereby certify that the information supplied with this filling 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 path; that I am an officer or director of the corporation or the repetyer 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 appears in Block in the empowered.

PIPEQ OR PRINTED HAME OF SIGNING OFFICER OR DIRECTO