

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # M82460 (0)

1. Corporation Name

CONSUMERS' PAINT & BODY, INC.



Principal Place of Business

609 N. FEDERAL HWY.  
BOYNTON BEACH, FL 33435  
US

Mailing Address

461 S.W. 3RD AVE.  
BOYNTON BEACH, FL 33435-4108  
US

3. Date Incorporated or Qualified  
05/24/1988

3a. Date of Last Report  
04/28/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

65-0052765

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

9. Name and Address of Current Registered Agent

WALLMUELLER, FRANK R  
609 N. FEDERAL HWY.  
BOYNTON BEACH FL 33435

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

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

Signature of person submitting this statement and the above information

Signature of Registered Agent submitting this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP  
PD WALLMUELLER, FRANK R  
609 N. FEDERAL HWY.  
BOYNTON BEACH FL

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

2. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

3. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

4. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

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14. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

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17. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

18. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

19. TITLE NAME STREET ADDRESS CITY-STATE-ZIP Change Addition

20. TITLE NAME STREET ADDRESS CITY-STATE-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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1/96

Date and Print Name

CR2E034 (12/95)