**FILED** 

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)				Apr 07, 2003 8:00 am Secretary of State	
DOCUMENT # M90445  1. Entity Name PANTHER PAINT & BODY INC.				Secretary of State 04-07-2003 90113 017 ***150.00	ΔV
Principal Place 124A LINDY L WEST PALM & US		Mailing Address 124A LINDY LANE WEST PALM BEACH FL 3: US	3406		
2. Principal P	Place of Business	3. Mailing Address		T THE LOCAL THE TABLE BOTH CLOUS BLOCK BY A PART BLOCK BLOCK BLOCK BLOCK BLOCK BLOCK	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
City & Stat	le .	City & State		4. FEI Number 65-0059915 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	
	6. Name and Address of Current	.IRegistered Agent		7. Name and Address of New Registered Agent	
	The second secon	~ ~ <u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>	Name M	ark T. Oceloek	
SPICER, STEPHEN & PENNY 124A LINDY LANE			Street Addre	ess (P.O. Box Number is Not Acceptable)	
	LM BEACH FL 33406		124-	A Lindy lane	
			1 West	Palm Beach FL Zugager	
the obligat SIGNATURE	Signature, typed or printed name of registered agent a	00h	E: Registered Agent signature re	9. Election Campaign Financing \$5.00 May Be	
	Payable to Florida Department of	State		Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPICER, STEPHEN R 124A LINDY LANE W. PALM BEACH FL	<b>⊠</b> Delete	NAME M	resident	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SPICER, PENNY M 124A LINDY LANE W. PALM BEACH FL	☑ Delete	TITLE 📴	est thim beach, FC 3 3406  Rec. Vice President Change Maddition of Change	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition	

12. Thereby certify that the information supplied with this filing does not qualify 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 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

**SIGNATURE:** 

of the corporation or the receiver or trustee e changed, or on an attachment with an address