

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000030459

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: ADVANCED BODY & FRAME, INC.

## Current Principal Place of Business:

3041 EAST 10TH AVENUE  
HIALEAH, FL 33013

## New Principal Place of Business:

## Current Mailing Address:

3041 EAST 10TH AVENUE  
HIALEAH, FL 33013

## New Mailing Address:

FEI Number: 65-0993249

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONT, JULIE  
8510 NW 190TH TERR.  
MIAMI, FL 33015 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: FONT, JULIE  
Address: 8510 NW 190TH TER.  
City-St-Zip: MIAMI, FL 33015

Title: TD ( ) Delete  
Name: LAZO, ALEJANDRA  
Address: 8510 NW 190TH TER.  
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete  
Name: LAZO, CRISTIAN P  
Address: 8510 NW 190 TERR.  
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete  
Name: GONZALEZ, JAIME  
Address: 8510 NW 190 TERR.  
City-St-Zip: MIAMI, FL 33015

Title: P ( ) Delete  
Name: FONT, ALBERT  
Address: 8510 NW 190 TER  
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete  
Name: MEDINA, SIHONY  
Address: 8510 NW 190 TER  
City-St-Zip: MIAMI, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALBERT FONT

P

01/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date