


**-2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P01000044054 1. Entity Name AMERICAN PAINT & BODY WORKS, INC. |  |
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| Principal Place of Business 2545 NW 39TH AVENUE MIAMI, FL 33142-6741 | Mailing Address 2545 NW 39TH AVENUE MIAMI, FL 33142-6741 |
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02282005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-1103306 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 5. Name and Address of Current Registered Agent ALVAREZ, JORGE 15511 SW 152ND LANE MIAMI, FL 33187 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | U000000269632 03/19/05-80019-021 150.00 |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P HERNANDEZ, ADOLFO SR 376 SW 162ND AVENUE PEMBROKE PINES, FL 33027 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Adolfo Hernandez - ADOLFO HERNANDEZ 3/14/05 - 305-871-2082
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #