


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000069411

1. Entity Name
ISLAND AUTO PAINT & BODY, INC.



Principal Place of Business
**12946 SW 87 AVE
MIAMI FL 33176**

Mailing Address
**12946 SW 87 AVE
MIAMI FL 33176**



2. Principal Place of Business
ISLAND Auto PAINT
Suite, Apt. #, etc.
MIAMI FL
City & State

3. Mailing Address
12946 S.W. 87 Ave
Suite, Apt. #, etc.
City & State
33176 Country

1st MOORE CR2E034 (10/05)

4. FEI Number **65-1147667** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**LORICK, ROOPLAL
12946 SW 87 AVE
MIAMI FL 33176**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 resigning) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LORICK, ROOPLAL 11260 SW 164 ST. MIAMI FL 33157 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000421443 02/16/06-80035-021 150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: **RooPlal Lorick** - ROOPLAL LORICK **01/30/06** **305-378-6569**