

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90005 008 ***150.00

DOCUMENT # P01000095454

1. Entity Name
THE AUTOBODYOLOGIST, INC.



Principal Place of Business
3212 NORTH POWERLINE ROAD
POMPAÑO BEACH, FL 33069

Mailing Address
3212 NORTH POWERLINE ROAD
POMPAÑO BEACH, FL 33069

54060943



2. Principal Place of Business

2939 N. Powerline Rd
Suite, Apt. #, etc.

3. Mailing Address

2939 N. Powerline Rd
Suite, Apt. #, etc.

06172004 Chg-P CR2E034 (10/03)

City & State
Pompano Beach, FL

City & State
Pompano Beach, FL

4. FEI Number
65-1140794

Applied For
Not Applicable

Zip
33069

Country
Broward

Zip
33069

Country
Broward

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

6. Name and Address of Current Registered Agent

HAGAN, THOMAS
3212 N POWERLINE RD
POMPAÑO BEACH, FL 33069

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
2939 N Powerline Rd

City Pompano Beach FL Zip Code 33069

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HAGAN, THOMAS
STREET ADDRESS 3212 NORTH POWERLINE ROAD
CITY-ST-ZIP POMPAÑO BEACH, FL 33069 ☐ Delete

TITLE V
NAME PALENCIA, DENIS
STREET ADDRESS 3212 NORTH POWERLINE ROAD
CITY-ST-ZIP POMPAÑO BEACH, FL 33069 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS
Hagan

7/9/04

754 421 771

Attachment

54060943
PO 100095454

July 6, 2004

Florida Department of State
Division of Corporations
Po box-1500
Tallahassee, fl 32302-1500

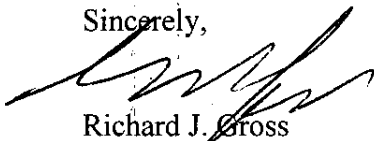
Dear Sir or Madam:

Enclosed please find our 2004 Annual Report along with a check for the annual fee of \$150.00. When we sent in our original filing we pulled the incorrect annual report from the computer (Please see the account for Autobodyologist Towing, Inc.). That corporation was actually to be dissolved and the report filed should have been for the corporation on the attached report. The ownership for both is the same.

Based on our telephone contact with your office we are forwarding the correct report and an additional \$150.00 to satisfy the fee requirement. We are a small family business and were attempting to file this report via the new annual report system for the first time. Clearly we understand our obligation and based on the above information would have been timely under normal circumstances.

Please process our enclosed report. If you have any questions please contact Richard Gross at 561-702-6030.

Sincerely,



Richard J. Gross
For the Firm