2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115486

FILED Mar 20, 2007 Secretary of State

Entity Name: HIGHLANDS BODY SHOP, INC. **Current Principal Place of Business: New Principal Place of Business:** 18760 CORTEZ BLVD 18760 CORTEZ BLVD BROOKSVILLE, FL 346013024 BROOKSVILLE, FL 346013024 US **Current Mailing Address: New Mailing Address:** 18760 CORTEZ BLVD 18760 CORTEZ BLVD BROOKSVILLE, FL 346013024 BROOKSVILLE, FL 346013024 US FEI Number: 59-3960573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HELF, ALLAN 18760 CORTEZ BLVD BROOKSVILLE, FL 346013024 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HELF, ALLAN HELF, ALLAN Name: Name: PO BOX 10078 PO BOX 10078 Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: BROOKSVILLE, FL 34601

Title: VΡ Title: VP,S () Delete (X) Change () Addition HELF, DOROTHY Name: Name: HELF, DOROTHY Address:

PO BOX 10078 PO BOX 10078 Address: BROOKSVILLE, FL 34601 BROOKSVILLE, FL 34601 City-St-Zip:

Title:

Title: () Delete ZUIDEMA, JOHN Name: Name: 7131 MULLENS RD. Address: Address: City-St-Zip: BROOKVILLE, FL 34609 City-St-Zip:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLAN HELF **PRES** 03/20/2007

() Change () Addition