


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 05, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000000713</b>	
1. Entity Name CP AUTO BODY & BOAT T-TOPS, INC.	

Principal Place of Business 6451 ULMERTON RD UNIT K LARGO, FL 33771	Mailing Address 6451 ULMERTON RD UNIT K LARGO, FL 33771
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03042006 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0556335	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  MORAIS, ZELIA 1959 BARRINGTON DR CLEARWATER, FL 33763
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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O MORAIS, ZELIA 8451 ULMERTON RD UNIT K LARGO, FL 33771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O MORAIS, JOSE M 8451 ULMERTON ROAD UNIT K LARGO, FL 33771
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04/19/06-80058-015 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

<b>SIGNATURE:</b> <i>Zelia Morais</i> <b>ZELIA MORAIS</b> <b>4/2/06</b>	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #
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