

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130865

FILED  
May 05, 2009  
Secretary of State

Entity Name: C & B COLLISION AUTO BODY SHOP INC

## Current Principal Place of Business:

12419 NE 13 AVE  
NORTH MIAMI, FL 33161 US

## New Principal Place of Business:

## Current Mailing Address:

12419 NE 13 AVE  
NORTH MIAMI, FL 33161 US

## New Mailing Address:

FEI Number: 11-3666708      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IGLESIAS, MARIA  
12419 NE 13 TH AVE  
NORTH MIAMI, FL 33161 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP/S ( ) Delete  
Name: IGLESIAS, VINCENT  
Address: 12419 NE 13TH AVE  
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: P/D ( ) Delete  
Name: IGLESIAS, MARIA  
Address: P.O.BOX 415381  
City-St-Zip: MIAMI BEACH, FL 33161 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARIA IGLESIAS

P/D

05/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date