2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000040786

Entity Name
 VIRGO AUTO BODY GROUP, INC.



Principal Place of Business

Mailing Address

729 NW 8TH AVE FORT LAUDERDALE, FL 33311 1431 NORTHWEST 54TH AVENUE LAUDERHILL, FL 33313

FILED May 01, 2006 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

03302006

No Chg-P

CR2E034 (11/05)

4. FEI Number 57-1178501

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VIRGO, EDWARD 729 NW 8TH AVE FORT LAUDERDALE, FL 33311

DO NOT WRITE IN THIS SPACE

				the state of the s		
8. The above the obligation	named entity submits this statement for the pations of registered agent	urpose of changing its registere	d office or i	egistered agent, or bo	oth, in the State of Florida I am familiar with, and accept	
SIGNATURE			Agent signatur	Agent signature required when remotating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Cempaign Financing \$5.00 May Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000557243 05/17/06~80041-023 150.00	
10.	OFFICERS AND DIREC	FORS	<u> </u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VIRGO, EDWARD 1431 NORTHWEST 54TH AVENUE LAUDERHILL, FL 33313					
TITLE VAME STREET ADDRESS CITY-ST-ZIP	VPD FELDER, ZELMAR 1431 NORTHWEST 54TH AVENUE LAUDERHILL, FL 33313					
TITLE NAME STREET ADDRESS CHY-ST-ZIP			DO NOT WRITE			
TITLE MAME STREET ADDRESS CITY+ST-ZIP				IN .	THIS SPACE	
RICE NAME SIREST ADDRESS CITY-ST-ZIP						
TOTALE NAME STREET ADDRESS						

12. Thereby certify that the information supplied with this filling 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.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF GRISING OFFICER OR DIRECTOR

City-St-ZiP

V 4/15/06.