

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077561

FILED
Feb 08, 2007
Secretary of State

Entity Name: CENTRAL BODY & PAINT WORK INC.

Current Principal Place of Business:

2032 W. WASHINGTON ST.
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

2032 W. WASHINGTON ST.
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 59-2373704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, BOBBY
1216 KIRK ST.
ORLANDO, FL 32805 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HENDERSON, BOBBY
Address: 1216 KIRK ST.
City-St-Zip: ORLANDO, FL 32808

Title: VP () Delete
Name: HENDERSON, SHIRLEY
Address: 1216 KIRK ST.
City-St-Zip: ORLANDO, FL 32808

Title: T () Delete
Name: HENDERSON, ANTHONY
Address: 1216 KIRK ST.
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: WASHINGTON, FRANCIS
Address: 610 VENTURE DR.
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S (X) Change () Addition
Name: MICHAEL, HENDERSON
Address: 1216 KIRK ST.
City-St-Zip: ORLANDO, FL 32808

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: BOBBY HENDERSON

P

02/08/2007

Electronic Signature of Signing Officer or Director

_____ Date