

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077561

FILED
Mar 31, 2008
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:

HENDERSON, BOBBY PRES.
1216 KIRK ST.
ORLANDO, FL 32805 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: BOBBY HENDERSON

03/31/2008

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: MICHAEL, HENDERSON
Address: 1216 KIRK ST.
City-St-Zip: ORLANDO, FL 32808

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: () 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: BOBBY HENDERSON

P

03/31/2008

Electronic Signature of Signing Officer or Director

Date