

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000125366

FILED
Oct 16, 2008
Secretary of State

Entity Name: GABLES GARAGE BODY SHOP INC.

Current Principal Place of Business:

109 SAN LORENZO
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

2435 SW 115 AVE
MIAMI, FL 33165

New Mailing Address:

109 SAN LORENZO
CORAL GABLES, FL 33146

FEI Number: 20-0352715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORENZO, MADELIN
2435 SW 115 AVE
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

LORENZO, MADELIN
109 SAN LORENZO AVE
CORAL GABLES, FL 33146 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: MADELIN LORENZO

10/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LORENZO, MADELIN
Address: 2435 SW 115 AVE
City-St-Zip: MIAMI, FL 33165

Title: T () Delete
Name: LORENZO, IHOSVANY R
Address: 5123 SW 7 ST
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LORENZO, MADELIN
Address: 109 SAN LORENZO
City-St-Zip: CORAL GABLES, FL 33146

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: MADELIN LORENZO

P

10/16/2008

Electronic Signature of Signing Officer or Director

Date