2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 03, 2005 8:00 am Secretary of State DOCUMENT # P03000142056 1. Entity Name 05-03-2005 90065 049 ***150.00 J. & T. CUSTOM REPAIR, INCORPORATED Principal Place of Business Mailing Address 10203 LAND O'LAKES BLVD 19808 HIAWATHA LAND O'LAKES FL 34639 ODESSA FL 33556 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) 10203 Land O'Lakes Blud City & State 4. FEI Number Applied For 26-0076255 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Hillsborous Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name KELLEY, JR., JAMES TIMOTHY PRES. Street Address (P.O. Box Number is Not Acceptable) 19808 HIAWATHA ODESSA FL 33556 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Detete TITLE Change ☐ Addition KELLEY, JR., JAMES TIMOTHY PRES. NAME NAME 19808 HIAWATHA STREET ADDRESS STREET ADDRESS CITY-ST-7IP ODESSA FL 33556 CITY-ST-7/P ☐ Delete TITLE ☐ Change ☐ Addition NAME JONES, ROY MICHAEL NAME STREET ADDRESS 12015 PILOT COUNTRY DR STREET ADDRESS CITY-ST-7IP SPRING HILL FL 34610 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

SIGNATURE: James T. Helley D. James T. KELLEY JR. PRESIDENT 4 /25/05 813-9206729

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.