## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000062192

City-St-Zip:

MIAMI, FL 33137 US

Entity Name: HIGHER IMAGE AUTO PAINT & BODY SHOP, INC.

FILED Aug 24, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
145 N.E. 2 MIAMI, FL	21 STREET 33137			
Current Mailing Address:			New Mailing Address:	
145 N.E. 2 MIAMI, FL	21 STREET 33137			
FEI Number	: 86-1101928	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
ONE SOU SUITE 126	, GARY W THEAST THIR 60 33131 US	D AVENUE		
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,
SIGNATUI	RE:			
	Electror	nic Signature of Registered Age	nt	Date
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution().	t receive the prior notice.	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P/S ( ARNAEZ, MILA 145 N.E. 21 ST MIAMI, FL 331	REET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S/T ( ARNAEZ, MAR 145 N.E. STRE MIAMI, FL 331	ET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ( ARNAEZ, MILA 145 N.E. 21 ST MIAMI, FL 331	REET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	D ( ARNAEZ, MAR 145 N.E. 21 ST		Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: MARLENE ARNAEZ S/T 08/24/2005