

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000079767

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** BETO'S BODY SHOP INC.

**Current Principal Place of Business:**

2605 W 6 AVE  
HIALEAH, FL 33010

**New Principal Place of Business:**

8038 NW 103 ST  
BAY 33-34  
HIALEAH GARDENS, FL 33016

**Current Mailing Address:**

2605 W 6 AVE  
HIALEAH, FL 33010

**New Mailing Address:**

8038 NW 103 ST  
BAY 33-34  
HIALEAH GARDENS, FL 33016

**FEI Number:** 20-2946785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MEDINA, CARLOS R  
2605 W 6 AVE  
MIAMI, FL 33010 US

**Name and Address of New Registered Agent:**

MEDINA, CARLOS R  
8038 NW 103 ST  
BAY 33-34  
HIALEAH GARDENS, FL 33016 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/27/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MEDINA, CARLOS R  
Address: 2541 SW 99CT  
City-St-Zip: MIAMI, FL 33165

I hereby 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 all other like empowered.

SIGNATURE: CARLOS R. MEDINA

PD

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date