

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036468

FILED
Mar 18, 2009
Secretary of State

Entity Name: JG COLLISION SPECIALIST, INC.

Current Principal Place of Business:

6020 NASHUA AVE
ORLANDO, FL 32809 US

New Principal Place of Business:

2433 DEER CREEK BLVD
SAINT CLOUD, FL 34772 US

Current Mailing Address:

6020 NASHUA AVE
ORLANDO, FL 32809 US

New Mailing Address:

2433 DEER CREEK BLVD
SAINT CLOUD, FL 34772 US

FEI Number: 20-4502560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, JOHN
6020 NASHUA AVE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

GOMEZ, JOHN
2433 DEER CREEK BLVD
SAINT CLOUD, FL 34772 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: JOHN GOMEZ

03/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOMEZ, JOHN
Address: 6020 NASHUA AVE
City-St-Zip: ORLANDO, FL 32809 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOMEZ, JOHN
Address: 2433 DEER CREEK BLVD
City-St-Zip: SAINT CLOUD, FL 34772 US

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: JOHN GOMEZ

P

03/18/2009

Electronic Signature of Signing Officer or Director

Date