

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000121562

Entity Name: PALMETTO BODY SHOP INC.

FILED  
Dec 22, 2008  
Secretary of State

## Current Principal Place of Business:

9550 N.W. 79 AVE., BAY 22  
HIALEAH GARDENS, FL 33016

## New Principal Place of Business:

## Current Mailing Address:

9550 N.W. 79 AVE., BAY 22  
HIALEAH GARDENS, FL 33016

## New Mailing Address:

FEI Number: 68-0662548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VASQUEZ, MARIA D  
9550 N.W. 79 AVE., BAY 22  
HIALEAH GARDENS, FL 33016 US

## Name and Address of New Registered Agent:

PAZ, FREDY  
9550 N.W. 79 AVE., BAY 22  
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: FREDY PAZ

12/22/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: VASQUEZ, MARIA D  
Address: 9550 N.W. 79 AVE., BAY 22  
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: VPD (X) Delete  
Name: VASQUEZ, BARBARA I  
Address: 9550 N.W. 79 AVE., BAY 22  
City-St-Zip: HIALEAH GARDENS, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PAZ, FREDY  
Address: 9550 N.W. 79 AVE., BAY 22  
City-St-Zip: HIALEAH GARDENS, FL 33016

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: FREDY PAZ

P

12/22/2008

Electronic Signature of Signing Officer or Director

Date