

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000030711

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** PHANTOM BODY SHOP, CORP.

**Current Principal Place of Business:**

4063 NW 135 ST  
OPALOCKA, FL 33054

**New Principal Place of Business:**

4079 NW 135T STREET  
OPALOCKA, FL 33054

**Current Mailing Address:**

4063 NW 135 ST  
OPALOCKA, FL 33054

**New Mailing Address:**

4079 NW 135T STREET  
OPALOCKA, FL 33054

**FEI Number:** 26-4628211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRUZ, YOAN RODRIGUEZ  
4063 NW 135 ST  
OPALOCKA, FL 33054 US

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

CRUZ, YOAN RODRIGUEZ  
4079 NW 135T STREET  
OPALOCKA, FL 33054 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: YOAN RODRIGUEZ

04/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RODRIGUEZ CRUZ, YOAN  
Address: 4063 NW 135 ST  
City-St-Zip: OPALOCKA, FL 33054

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: YOAN RODRIGUEZ

P

04/12/2011

Electronic Signature of Signing Officer or Director

Date