

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000068019

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** ONE STOP RESTORE SHOP INC

**Current Principal Place of Business:**

4106 GALL BOULEVARD  
ZEPHYRHILLS, FL 33542

**New Principal Place of Business:**

**Current Mailing Address:**

5100 CARROTWOOD DRIVE  
ZEPHYRHILLS, FL 33541

**New Mailing Address:**

4106 GALL BOULEVARD  
ZEPHYRHILLS, FL 33542

**FEI Number:** 27-2893337

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ROSS, DARLENE  
5100 CARROTWOOD DRIVE  
ZEPHYRHILLS, FL 33541 US

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

MATHEWS, SHAWN  
5100 PEACHWOOD DRPP  
ZEPHYRHILLS, FL 33541 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:** SHAWN MATHEWS

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MATHEWS, SHAWN  
**Address:** 5100 PEACHWOOD DR  
**City-St-Zip:** ZEPHYRHILLS, FL 33541

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:** SHAWN MATHEWS

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date