

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000101335

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** GABLES GARAGE PAINT & BODY SHOP, INC.

**Current Principal Place of Business:**

109 SAN LORENZO AVE  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 143440  
CORAL GABLES, FL 33114 0

**New Mailing Address:**

**FEI Number:** 27-4297523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALFONZO, MARCO  
109 SAN LORENZO AVE  
CORAL GABLES, FL 33146 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: ALFONZO, MARCO  
Address: 109 SAN LORENZO AVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: VPSD  
Name: VILLAR, JUAN  
Address: 109 SAN LORENZO AVE  
City-St-Zip: CORAL GABLES, FL 33146

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: MARCO ALFONZO

PTD

05/01/2012

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

\_\_\_\_\_  
Date