## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000001086

City-St-Zip:

BOCA RATON, FL 33498

Entity Name: WEST BOCA AUTO PAINTING, INC

FILED Apr 08, 2009 Secretary of State

Littly Nan	ile. WEST BO	DCA AUTO FAINTING, INC.			
Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
BAY A-47-9	NISH ISLES E ON, FL 3349				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
10018 SPANISH ISLES BLVD BAY A-47-9 BOCA RATON, FL 33498			BAY A-47-49	10018 SPANISH ISLES BLVD BAY A-47-49 BOCA RATON, FL 33498	
FEI Number:	65-0378671	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
SCHWARTZ, ISRAEL 10018 SPANISH ISLE BLVD A -47-49 BOCA RATON, FL 33498 US			10018 SPANÍSH ISLE A -47-9	SCHWARTZ, ISRAEL 10018 SPANISH ISLE BLVD A -47-9 BOCA RATON, FL 33498 US	
The above in the State		submits this statement for the pu	ırpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				04/08/2009	
	Electron	ic Signature of Registered Ager	nt	Date	
Election Cam	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SCHWARTZ, IS	HILSES BLVD. SUIT A-47	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SCHWARTZ, M	HISLES BLVD. SUITE A-49	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	SCHWARTZ, SI	Delete HARON H ISLES BLVD #A49	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: ISRAEL SCHWARTZ P 04/08/2009