## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address 6451 ULMERTON ROAD

LARGO FL 33771-4914

2a. Mailing Address

UNIT#K

US

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000028774 (6)

C. P. AUTO BODY INC.

Principal Place of Business

2. Principal Place of Business

SIGNATURE:

6451 ULMERTON ROAD

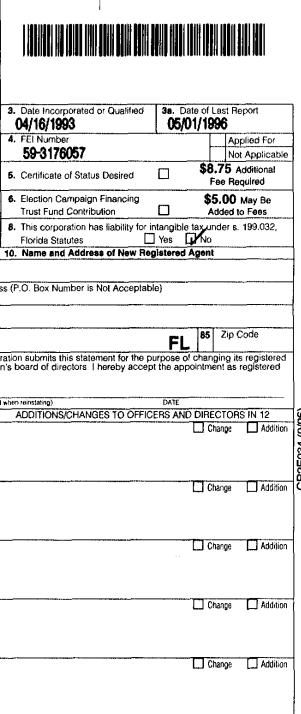
LARGO FL 34641

**LINET#K** 

US

21 26 Suite Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be П 23 Trust Fund Contribution Added to Fees 28 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes Vo Country Country Ζıρ 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MORAIS, ZELIA 1959 BARRINGTON DRIVE N Street Address (P.O. Box Number is Not Acceptable) 82 **CLEARWATER FL 34623** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registored agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)☐ Addition Change THILE []] DELETE 1.1 TOTLE MORAIS, JOSE 1.2 NAME NAME CR2E034 1959 BARRINGTON DRIVE N 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34623** 1.4 CITY-ST-ZIP C:TY-ST-ZIF Addition DELETE Channe THILE 2.1 TITLE MORAIS, ZELIA NAV. 2 2 NAME 1959 BARRINGTON DRIVE N STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL 34823** Q11 y - S1 - 71P 2.4 CITY-ST-2IP DELETE Addition Change 31 TITLE 11/11 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - \$1 - 7/2 DELETE Change ☐ Addition 4.1 TITLE THEF NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - 20P DELETE Change TITLE \_\_ Addition 5.1 TITLE 5.2 NAME NAME STREET ADORESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition THLE 6.1 TITLE NAMÉ 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or

FILED Mar 06 1997 8:00am Secretary of State



Dayoma Phone #