2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2005 08:00 AM Secretary of State

Daytime Phone #

ANNUAL REPORT				Apr 22, 2005 06.00 A			
DOCUM 1. Entity Name		Secretary of State					
RKG BODY	SHOP, INC.						
Principal Place of		Mailing Address]			
2315 S. STATE ROAD 7 HOLLYWOOD, FL 33023 — HOLLYWOOD, FL 33023							
			A STATE OF S				
				04182005	No Chg-P	CR2E034 (10/03)	
DO NOT WRITE IN THIS SPACE			CE	4. FEI Numbe	<u> </u>	Applied	For
				65-0523	3643	Not App \$8.75 Additiona	
				5. Certificate	of Status Desired	Fee Required	
	6. Name and Address of Current Re	egistered Agent			•		
GRIESMEYER, ED 2315 S. STATE ROAD 7 HOLLYWOOD, FL 33023			<u> </u>	DO	NOT W	RITE	
			IN THIS SPACE				
			į				
	med enlity submits this statement for t s of registered agent.	he purpose of changing its register	ed office or register	red agent, or bot	h, in the State of Flo	orida. I am familiar with, and a	accept
SIGNATURE						DATE	 .
Sigi	nature, typed or printed name of registered agent ani		ed Agent signature require	7	<u></u> .	UNIE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			noing \$5	.00 May Be led to Fees			
TITLE D	OFFICERS AND D	RECTORS			,		
NAME G	GRIESMEYER, ROBERT K	•			Unnonn	ንማማውፋ	
1 1	145 PIERCE ST., STE. 104 IOLLYWOOD, FL 33020		Í		04/22/05-	323913 80072-018 150.0	0
TITLE S	GREISMEYER, ED	· ·	<u> </u>				
1 '	315 S. STATE ROAD 7		ļ				
	IOLLYWOOD, FL 33020						
NAME			İ				
STREET ADDRESS CITY-ST-ZIP]	DO	NOT W	RITE	
TITLE				IN 7	THIS SE	PACE	
NAME STREET ADDRESS			l l	# # T		/	
CITY-ST-ZIP			1				
TITLE	•	,·		-			
STREET ADDRESS							
CITY-SY-ZIP	A			met out of	-		
NAME	_//		}				
STREET ADDRESS							

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes, I further certify that the information indicated on this report or supplied with that I am an officer or director of the corporation or the received on this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ELERIESHEYEN,

NURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: