

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P95000058899**
 1. Entity Name

G & J Body Shop, Inc.

FILED
 DEPARTMENT OF STATE
 DIVISION OF CORPORATION
 01 DEC 26 AM 11:08

Principal Place of Business Mailing Address

2. Principal Place of Business **7511 NW 73 Ave** 3. Mailing Address **SAME**

Suite, Apt. #, etc. **#124** Suite, Apt. #, etc.

City & State **MIAMI, Florida** City & State

Zip **33166** Country Country

4. FEI Number **65-0602173** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
RODRIGUEZ, GILBERTO
7511 NW 73 Ave #124
MIAMI, Florida, 33166

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Y RODRIGUEZ, GILBERTO 7511 NW 73 Ave #124 MIAMI, Florida, 33166 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS HOTTMAN, MARIA C. 7511 NW 73 Ave #124 MIAMI, Florida, 33166 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700004765497--8 -01/10/02--01075--024 ***300.00 ***300.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby 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 report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Date **12-18-01** Daytime Phone # **305-887-4185**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034-(11/00)

G & J BODY SHOP, INC.

7511 NW 73 Ave # 124
Miami, Florida, 33166

December 18, 2001

~~DEPARTMENT OF STATE~~

REF: DOCUMENT # P95000058899

AS PER OUR PHONE CONVERSATION INCLUDE IS THE CHECK #303 FOR
THE AMOUNT OF \$300.00 AS PAYMENT FOR THE UNIFORMED BUSINESS
REPORT YEARS 2000 AND 2001.

PLEASE TAKE NOTE OF THE CHANGE OF ADDRESS

PLEASE ACCEPT MY PAYMENT AND LATENESS.

THANKS FOR YOUR HELP.

ATTE.



GILBERTO RODRIGUEZ
PRESIDENT