

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078226

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** STATEWIDE AUTO UPHOLSTERY, INC.

**Current Principal Place of Business:**

1696 OLD OKEECHOBEE ROAD  
1J  
W PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

1696 OLD OKEECHOBEE ROAD  
1J  
W PALM BEACH, FL 33409

**New Mailing Address:**

**FEI Number:** 65-0649252

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARPEICHUK, LEONARD  
1696 OLD OKEECHOBEE RD.  
J1  
WEST PALM BEACH, FL 33409 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: PS  
Name: KARPEICHUK, LEONARD  
Address: 1696 OLD OKEECHOBEE RD #1-J  
City-St-Zip: W PALM BEACH, FL 33409

Title: VT  
Name: KARPEICHUK, LEONARD  
Address: 1696 OLD OKEECHOBEE RD #1-J  
City-St-Zip: WEST PALM BEACH, FL 33409

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: LEONARD KARPEICHUK

PRES

04/30/2012

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

\_\_\_\_\_  
Date