

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000094450

**FILED**  
**Oct 26, 2012**  
**Secretary of State**

**Entity Name:** YIMMY'S BODY SHOP & AUTO REPAIR, INC.

**Current Principal Place of Business:**

2642-C NORTH MICHIGAN AVE.  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

3070 MICHIGAN AVE.  
UNIT A  
KISSIMMEE, FL 34744

**Current Mailing Address:**

2642-C NORTH MICHIGAN AVE.  
KISSIMMEE, FL 34744

**New Mailing Address:**

3070 MICHIGAN AVE.  
UNIT A  
KISSIMMEE, FL 34744

**FEI Number:** 59-3411139

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MENDEZ, ISRAEL  
613 MOSS PARK COURT  
KISSIMMEE, FL 34743 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: DPT  
Name: MENDEZ, ISRAEL  
Address: 613 MOSS PARK COURT  
City-St-Zip: KISSIMMEE, FL 34743

Title: DS  
Name: MENDEZ, GLADYS C  
Address: 613 MOSS PARK COURT  
City-St-Zip: KISSIMMEE, FL 34743

Title: DVP  
Name: MENDEZ, JIMMY  
Address: 613 MOSS PARK COURT  
City-St-Zip: KISSIMMEE, FL 34743

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: ISRAEL MENDEZ

PRES

10/26/2012

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

\_\_\_\_\_  
Date