

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000082081

**FILED**  
**Oct 23, 2006**  
**Secretary of State**

**Entity Name:** PRO COMP CUSTOM PAINT & AUTO BODY, INC.

**Current Principal Place of Business:**

1432 VISCAYA PKWY  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1432 VISCAYA PKWY  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 65-0952197

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARVEY, BRUCE R  
1432 VISCAYA PARKWAY  
CAPE CORAL, FL 33990 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: D ( ) Delete  
Name: HARVEY, BRUCE R  
Address: 1432 VISCAYA PARKWAY  
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VICE ( ) Change (X) Addition  
Name: HARVEY, ROBIN  
Address: 1432 VISCAYA PARKWAY  
City-St-Zip: CAPE CORAL, FL 33990

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** BRUCE HARVEY

D

10/23/2006

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

\_\_\_\_\_  
Date