


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000097811
 1. Entity Name
 ONE STOP AUTO BODY, INC.



Principal Place of Business 3853 REID ST PALATKA, FL 32177	Mailing Address 3853 REID ST PALATKA, FL 32177
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DO NOT WRITE IN THIS SPACE



01112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3610030	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STUTO, SALVATORE
 3853 REID ST
 PALATKA, FL 32177

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE Registered Agent signature required when reissuing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STUTO, SALVATORE 3851 REID ST PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STUTO, ANGELA 406 NICHOLS RD PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 01/18/08-80055-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X [Signature]* Angela Stuto 1/16/8 386 328-8461

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #