

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S18212

FILED
May 27, 2009
Secretary of State

Entity Name: ECONOMY AUTO PAINTING & BODYWORKS, INC.

Current Principal Place of Business:

1090 S 56 AVE
HOLLYWOOD, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

1090 S 56 AVE
HOLLYWOOD, FL 33023 US

New Mailing Address:

FEI Number: 65-0233157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL COHEN
1090 SOUTH 56 AVE.
HOLLYWOOD, FL 33023 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COHEN, MICHAEL
Address: 17001 SW 63RD MANOR
City-St-Zip: FT. LAUDERDALE, FL 33331

Title: ST () Delete
Name: COHEN, MICHAEL
Address: 17001 SW 63RD MANOR
City-St-Zip: FT. LAUDERDALE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL COHEN

PRES

05/27/2009

Electronic Signature of Signing Officer or Director

Date