

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V27253

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: ACCESSORIES OF TAMPA BAY/CRB,INC.

## Current Principal Place of Business:

6403 N. 50TH STREET  
TAMPA, FL 33610

## New Principal Place of Business:

## Current Mailing Address:

6403 N. 50TH STREET  
TAMPA, FL 33610

## New Mailing Address:

FEI Number: 59-3108438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNAPP, ROBIN B  
18904 ARBOR DR  
TAMPA, FL 33649 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BUSBY, C.R.,  
Address: 6403 N. 50TH ST  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: KNAPP, ROBIN B.,  
Address: 18904 ARBOR  
City-St-Zip: LUTZ, FL 33548

Title: D ( ) Delete  
Name: KNAPP, DEWANNA,  
Address: 18904 ARBOR  
City-St-Zip: LUTZ, FL 33548

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BUSBY, C R  
Address: 6403 N. 50TH ST  
City-St-Zip: TAMPA, FL 33610

Title: D (X) Change ( ) Addition  
Name: KNAPP, ROBIN B  
Address: 18904 ARBOR  
City-St-Zip: LUTZ, FL 33548

Title: D (X) Change ( ) Addition  
Name: KNAPP, DEWANNA  
Address: 18904 ARBOR  
City-St-Zip: LUTZ, FL 33548

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: ROBIN B KNAPP

PRES

01/30/2008

Electronic Signature of Signing Officer or Director

Date