FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90064 001 ***150.00

DOCUMENT # V48337

1. COMPORT OF THE PAINT & BODY, INC.

Principal Place of Business 207-A KELLY ROAD NICEVILLE FL 32578 Mailing Address

P O BOX 398 VALPARAISO FL 32580

US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

07/01/1002

							שטטו וו טנוט				
2.	Principal Place of Business	2a	Mailing Address		4	4.	FEI Number				Applied For
4	•	26			ļ	- 1	59-3130913		上		Not Applicable
<u>.</u>	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.		5		Certifcate of Status Desired				Additional Required
<u>-</u> 1	City & State	28	City & State		6		Election Campaign Financing Trust Fund Contribution		•		0 May Be d to Fees
ا <u>د</u> ایر	Zip Country	29	Zip Country	ry	8		This corporation owes the curre Personal Property Tax.		gible X Ye:		□No
_	9. Name and Address of Current R	10. Name and Address of New Registered Agent									
	CHURCH, JACK J.		81	1	Name						
	207-A KELLY ROAD		82	82 Street Address (P.O. Box Number is Not Acceptable)							
	NICEVILLE FL 32578		83	3							
			84	4	City	_		FL	85	Zi	p Code
					·						

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	A STATE OF THE STA	licable /AIOTS: I	Registered Agent agnature require	d when reinstating) DATE			
12.	Signature, typed or printed name of registered agent and title if appl OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1			
TITLE	DPS	☐ DELETE	1.1 TITLE	☐ Change	Addition		
NAME	CHURCH, JACK J.		1.2 NAME				
STREET ADDRESS	COM A MELLY BOAR		1.3 STREET ADDRESS				
CITY-ST-ZIP	NICEVILLE FL		1.4 CITY-ST-ZIP				
TITLE	T	DELETE	2.1 TITLE	☐ Change	☐ Addition		
NAME	CHURCH, JACK J.		22 NAME				
STREET ADDRESS	AAR A MELLY BOAD		2.3 STREET ADDRESS				
CITY-ST-ZIP	NICEVILLE FL		2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE	Change	☐ Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE	Change	☐ Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE	☐ Change	☐ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE	Change	☐ Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS	•			
			64 CITY- ST- ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

MATURE AND SEED OF PRINCES NAME OF SIGNING OFFICER OR DIRECTOR

3-15-99 850-729-7495

32E034 (11/98)