I hereby 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 all other like empowered.

SIGNATURE: BRYAN FITZPATRICK

Electronic Signature of Signing Officer/Director Detail

FEI Number: 76-0710509 Name and Address of Current Registered Agent:

DOCUMENT# P02000084197

Current Mailing Address: 9491 ULMERTON RD LARGO, FL 33771 US

Current Principal Place of Business:

FITZPATRICK, BRYAN 9491 ULMERTON RD LARGO, FL 33771 US

9491 ULMERTON RD LARGO, FL 33771

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

Officer/Director Detail :

Title	PD	Title	DV
Name	FITZPATRICK, BRYAN L	Name	FITZPATRICK, NANCY
Address	9491 ULMERTON RD	Address	9491 ULMERTON RD
City-State-Zip:	LARGO FL 33771	City-State-Zip:	LARGO FL 33771

PRESIDENT

03/12/2020

Date

FILED Mar 12, 2020 Secretary of State 6116063153CC

Certificate of Status Desired: No

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: SCRATCH N DENT AUTO BODY SPECIALIST, INC.

Date