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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000050073**

1. Corporation Name
BUCHHOLZ FRAME & BODYSHOP, INC.

Principal Place of Business	Mailing Address
1730 S. FEDERAL HIGHWAY #315 DELRAY BEACH FL 33483	1730 S. FEDERAL HIGHWAY #315 DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 06/04/1998

2. Principal Place of Business	2a. Mailing Address
21 2208 NW 71st Place	26 141 NW 20th Street
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite G129
City & State 23 Gainesville, FL	City & State 28 Boca Raton, FL
Zip / Country 24 32653 25 US	Zip / Country 29 33431 30 US

4. FEI Number: 59-3528419 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip 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 Thomas Coyne 01/25/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		☐ DELETE	1.1 TITLE	President	☐ Change ☒ Addition
NAME			1.2 NAME	John Calia	
STREET ADDRESS			1.3 STREET ADDRESS	141 NW 20th St. Suite G-129	
CITY-ST-ZIP			1.4 CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE		☐ DELETE	2.1 TITLE	Chief Financial Officer	☐ Change ☒ Addition
NAME			2.2 NAME	Larry Litowitz	
STREET ADDRESS			2.3 STREET ADDRESS	141 NW 20th St. Suite G-129	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE		☐ DELETE	3.1 TITLE	Chief of Operations	☐ Change ☒ Addition
NAME			3.2 NAME	Thomas Coyne	
STREET ADDRESS			3.3 STREET ADDRESS	141 NW 20th St. Suite G-129	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Boca Raton, FL 33431	
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		
CITY-ST-ZIP			6.4 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: Thomas Coyne 01/25/99 (561) 901-0671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)