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

FILED Apr 06 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name (1)MAIN STREET CAR WASH, INC. Principal Place of Business Mailing Address 2852 SEVEN SPRINGS BLVD 2852 SEVEN SPRINGS BLVD NEW PORT RICHEYT FL 34684 **NEW PORT RICHEY FL 34655** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/07/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2907879 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 26 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes □ Ño 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 VALK, NEIL A. Name 2700 TAMPA RD 82 Number is Not Acceptable) PALM HARBOR_EL_34684 84 Zip Code ろりんら City Ne 2002 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered tate of forida. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered by all the corporation of Court of the corporation of the corporatio 11. Pursuant to the provision: office or registered age agent. I am familiar will **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) ne of registered agent and title if applicable (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE VALK, NEIL A. 1.2 NAME NAME 2852 SEVEN SPRINGS BLVD STREET ADDRESS 1.3 STREET ADDRESS **NEW PORT RICHEY FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 61 TITLE TITLE

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 oport is frue 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 ompowered 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.

6.2 NAME 6.3 STREET ADDRESS

NAME

STREET ADDRESS