2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006335

Entity Name: FLEETWASH, INC. OF NEW JERSEY

FILED Feb 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 273 PASSAIC AVE FAIRFIELD, NJ 07004 **Current Mailing Address: New Mailing Address:** P.O. BOX 1577 WEST CALDWELL, NJ 070071577 FEI Number: 22-2867084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LARNEY, WILLIAM C/O FLEETWASH, INC 1775 CENTRAL FLORIDA PKWY., SUITE D ORLANDO, FL 32837 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DIGIOVANNI, VITO Name: Name: 273 PASSAIC AVE. Address: Address: City-St-Zip: FAIRFIELD, NJ 07004 City-St-Zip: VCST Title: Title: () Delete (X) Change () Addition Name: TALAMINI, GARY Name: MARC, ALTHEN 273 PASSAIC AVE **ROUTE 10 GREEN HILLS** Address: Address: FAIRFIELD, NJ 07004 READING, PA 19603 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition MICCHELLI, NEIL JAMES, HISLOP Name: Name: 35 HOLIDAY DR. ONE HARMON PLAZA 9THFLOOR Address: Address: WEST CALDWELL, NJ 07006 City-St-Zip: SECAUCUS, NJ 07094 City-St-Zip: Title: () Delete Title: (X) Change () Addition HARDY, ELIZABETH RICHARD, PETERS Name: Name: Address: 3801 VICTORIA DR. Address: 2555 TELEGRAPH ROAD City-St-Zip: MT. KISCO, NY 10549 City-St-Zip: BLOOMFIELD HILLS, MI 48302-095 Title: Title: () Delete (X) Change () Addition DICARLO, JAMES JR. Name: DICARLO, JAMES JR. Name: 273 PASSAIC AVE. Address: 273 PASSAIC AVE. Address: City-St-Zip: FAIRFIELD, NJ 07004 City-St-Zip: FAIRFIELD, NJ 07004 Title: () Delete Title: () Change (X) Addition DIRIENZO, MICHAEL Name: Name: ONE HARMON PLAZA 9THFLOOR Address: Address: City-St-Zip: City-St-Zip: SECAUCUS, NJ 07094

I hereby certify that the information supplied with this filing does not qualify for the 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: VITO DIGIOVANNI CP 02/28/2006