

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Sep 19 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **369166** (4)  
1. Corporation Name  
**CAR WASH EQUIPMENT & SUPPLY RYKO OF SOUTH FLORIDA, INC.**



Principal Place of Business  
**3806 N 29TH AVENUE  
HOLLYWOOD FL 33020  
US**

Mailing Address  
**3806 N 29TH AVENUE  
HOLLYWOOD FL 33020  
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>11820 NW 37 STREET</b>		2a. Mailing Address 26 <b>11820 NW 37 STREET</b>		3. Date Incorporated or Qualified <b>09/01/1970</b>	3a. Date of Last Report <b>01/24/1996</b>
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number <b>59-1365544</b>	Applied For <input type="checkbox"/> Not Applicable
City & State 23 <b>CORAL SPRINGS, FL</b>		City & State 28 <b>CORAL SPRINGS, FL</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 24 <b>33065</b>	Country 25	Zip 29 <b>33065</b>	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

9. Name and Address of Current Registered Agent

**MACKEY, WILLIAM K  
3806 N. 29 AVENUE  
DANIA, FL  
HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent

81 Name **MACKEY, WILLIAM K.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**11820 NW 37 STREET**  
83  
84 City **CORAL SPRINGS** FL 85 Zip Code **33065**

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

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 NAME STREET ADDRESS CITY-ST-ZIP	<del>PTD</del> <b>MACKEY, WILLIAM K</b> <del>3806 N. 29 AVENUE</del> <del>HOLLYWOOD FL</del>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>S.O</b> <b>MACKEY, WILLIAM K.</b> <b>11820 NW 37 STREET</b> <b>CORAL SPRINGS, FL 33065</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>VS</del> <del>SWARTZ, JEFFREY L</del> <del>3806 N 29TH AVENUE</del> <del>HOLLYWOOD FL</del>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>VS</del> <del>SCHULTZ, JEFFREY L</del> <del>3806 N 19TH AVENUE</del> <del>HOLLYWOOD FL</del>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>VS</del> <del>OLIVA, WILLIAM F</del> <del>3806 N 20TH AVENUE</del> <del>HOLLYWOOD FL</del>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<b>P</b> <b>REMILLARD, BRUCE</b> <b>11820 NW 37 STREET</b> <b>CORAL SPRINGS, FL 33065</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<b>T.O</b> <b>OVERMEYER, GEORGE</b> <b>11820 NW 37 STREET</b> <b>CORAL SPRINGS FL 33065</b>

14. I do 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.

SIGNATURE

**MACKEY, WILLIAM K** 9/2/97 (1954) 296-3338

CR2E034 (4/97)