FILE ON OR BEFORE APRIL 7, 1999 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A30673

MAJESTIC CAR WASH PARTNERSHIP, LTD.

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Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record
2781 N. FEDERAL HIGHWAY	2781 N. FEDERAL HIGHWAY	10/04/1990	\$200,000.00
FT. LAUDERDALE FL 33306	FT, LAUDERDALE FL 33306	3a. Date of Last Report	\$200,000.00
		02/13/1998	5b. Amount of Capital Contributions in FLORIDA
. 2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation	to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6, FEI Number 65-0237016	Applied For
City & State	City & State		Not Applicable
Zip Country	Z _I p Count	7. Certificate of Status Desired	\$8,75 Additional Fee Required
		8. Make check payable to Dept o	f State (See reverse side for fee information)
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office			
BORAKOVE, GERALD L CPA 6196 NW 11TH ST SUNRISE FL 33313-6116		Name	
		Street Address (P.O. Box Number Is Not Acceptable)	
		Suite, Apt #, etc.	
,	City		FL Zip Code
agent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAT	egistered agent, or both, in the State of Florida Suc of section 620.192, Florida Statutes.	change was authorized by its general partner(s). There DATE TED PARTNERSHIP OR OTH	by accept the appointment of registered
MUS	T BE REGISTERED AND A	CTIVE WITH THIS OFFICE.	
11. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numb	ers) 11b. City, State & Zip Code	11c. Registration/ Document Number
MAJESTIC CAR WASH OF FORT LA	2781 NORTH FEDERAL HW	FT. LAUDERDALE FL	L72256
		\$00002 -03/09 *****\$ \langle \langle \	79599405 73301083003 26.25 ****\$26.25
4		3.8	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this fiting is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes I release the Division of Corporations from any flability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and source shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to

SIGNATURE

Typed or Printed Name of General Partner Signing Form

DATE 2-19-49

Daytime Telephone Number