

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A30673

1. Entity Name
MAJESTIC CAR WASH PARTNERSHIP, LTD.



Principal Place of Business
**1832 MONTE CARLO WAY
CORAL SPRINGS, FL 33071-7829**

Mailing Address
**1832 MONTE CARLO WAY
CORAL SPRINGS, FL 33071-7829**

FILED
08 JAN 29 PM 2:58
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



01052008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0237016

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KAUFMAN, IRENE
1832 MONTE CARLO WAY
CORAL SPRINGS, FL 33071-7829**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**MAJESTIC CAR WASH OF FORT LAUDERDALE, INC.
1832 MONTE CARLO WAY
CORAL SPRINGS, FL 330717829**

DOCUMENT #
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CITY - ST - ZIP

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700116634687
02/01/08--01004--016 **500.00

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

954-344-7838